



COLNE GOLF CLUB

MEMBERSHIP NOMINATION FORM

I wish to become a	Playing		Member of Colne Golf Club
	House		
	Country		
	Junior/Intermediate		

Name.....
Mr/Mrs/Miss/Ms/Other (delete as applicable)

Address.....
.....

Postcode..... DOB.....

Email.....

Home Tele No..... Mobile.....

Previous Golf Club (if applicable).....

Handicap..... CDH No.....

Signed..... Date.....

We, the proposer and seconder each being a full or lady member the of the Club of at least three years standing, in recommending the candidate for membership, vouch that he or she is personally know to each of us and the the best of our belief, is a proper person for admission to the club

Proposer..... Date.....

Seconder..... Date.....