



West Surrey Golf Club

Membership Application Form

Please complete this form in block letters

Applicants' Name:	
Type of Membership:	
Date of Birth:	
Address: Post Code:
Private Telephone No:	
Mobile Telephone No:	
Other Previous Clubs:	
Handicap:	
Occupation:	
Name of Company (if any) and place of business:	
Business Telephone Numbers:	
Email Address:	
Applicant's Signature:	
Name of Proposer: I have known the applicant for years. I have been a member of West Surrey Golf Club for at least three full years and I have played at least one round of golf with the applicant. Signed: Date of Proposal:	
Name of Seconder: I have known the applicant for years. I have been a member of West Surrey Golf Club for at least three full years and I have played at least one round of golf with the applicant. Signed: Date of Proposal:	
Letters of recommendation from the Proposer and Seconder must accompany this application. No application can be accepted until these letters have been received. A declared handicap must be supported by a signed certificate. Any queries should be addressed to: The Secretary, West Surrey Golf Club, Enton Green, Godalming Surrey, GU8 5AF. Tel. No: 01482 421275	

Office Use

Date Received		Letter from Proposer	
Reference No		Letter from Seconder	Handicap