



# NEW MEMBER: MEMBERSHIP FORM 2024

1 April 2024 – 31 March 2025

## PERSONAL DETAILS

Forename(s)..... Surname.....

Address.....

.....Postcode.....

Home Tel..... Mobile.....

Work Tel.....

Email.....

(\* If transferring a National ID, please ensure this matches the address above)

D.O.B.....

Occupation.....

Handicap ..... National ID No. .... Home Club .....

Partners name (joint membership only).....

## MEMBERSHIP CATEGORY

\_\_\_\_\_

**Total Membership Fee - ..... plus Affiliation Fee ..... = £ ..... (Total payable)**

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I apply for membership and coupled with payment to The Point at Polzeath Ltd - I agree to at all times abide by The Membership terms. Management decision is final.

Signed .....

Date .....

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### **Office use only:**

Any notes: \_\_\_\_\_

Introduced by (if applicable): \_\_\_\_\_

Membership Card Number: \_\_\_\_\_ IG Log In \_\_\_\_\_ Member Pack \_\_\_\_\_

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_