



HILTON PARK GOLF CLUB

**APPLICATION FOR MEMBERSHIP 2019**

Mr/Mrs/Miss/Other:..... Forename(s):.....

Surname:.....

Address:.....

.....Post Code: .....

Date of birth:..... Occupation:.....

\*Home Tel:..... Work Tel:.....  
*(\*Will be displayed in the members' area of our website only for members over 18 years old)*

Mobile Tel:..... Email:.....

Class of Membership:.....

Name of Member who referred you to Hilton Park Golf Club.....

Current Handicap (if any) :.....*( please provide certificate where applicable)*

Previous/Existing Golf Club Membership (if any).....CDH No: .....

*(Print name of Club in block capitals)*

Do you wish Hilton Park Golf Club to be your Home Club for handicapping purposes.....

**How did you first hear about Hilton Park Golf Club Membership options? Please tick below.**

- Through friend or word of mouth
- Our website
- Facebook or Twitter- please specify which.....
- Advert in magazine or newspaper-please specify.....
- Through Footgolf
- Other-please specify.....

**For Office Use:**

- Swipe Card No:\_\_\_\_\_ ClubV1:\_\_\_\_\_ Date:\_\_\_\_\_
- FCDDM: \_\_\_\_\_ Cash:\_\_\_\_\_ Cheque:\_\_\_\_\_ Pay in:\_\_\_\_\_ Card\_\_\_\_\_ DD mandate \_\_\_\_\_