



BELVOIR PARK
GOLF CLUB

Information Form

(Please Print)

Name.....

Address.....

.....

.....Postcode.....

Tel. No.....Mob.....

Email Address.....

Date of Birth.....Male Female

Occupation.....

Do you attend – School/College/University?.....

Are you or have you been a member of a Golf Club?.....

Name of Club

Do you play?.....If yes, for how long?.....

Handicap

Which category of membership do you wish to apply for? *(Please tick the appropriate box)*

Seven-Day Youth Member (18 / 22)

Six-Day Junior Member (10 / 17)

Special Ordinary Social Member

Have you ever applied for membership of Belvoir Park Golf Club before?

Is so please give details including date of previous application.

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Are any other members of your family members of B.P.G.C?.....

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Have you any friends or associates who are members of B.P.G.C?.....

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.....(PTO)

For Official Use Only

Why do you wish to become a member of B.P.G.C.?

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What if any hobbies, sports or pastimes to you have?

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Can you offer any more information, which would support you in your application?

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Have you ever been convicted of an offence other than a motoring offence?

(If so please indicate).....

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I confirm to the best of my knowledge that the above information is accurate.

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

Print Name.....

This form should be returned to: Honorary Secretary
Belvoir Park Golf Club
73-75 Church Road
Newtownbreda
Belfast BT8 7AN

N.B. THIS DOCUMENT IS FOR INFORMATION PURPOSES ONLY AND IS THE INITIAL STAGE OF AN APPLICATION PROCESS. THE FORM THEREFORE SHOULD NOT BE CONSTRUED AS AN OFFER OF MEMBERSHIP