



BELVOIR PARK  
GOLF CLUB

# BELVOIR PARK GOLF CLUB

## Membership Application Form

**I wish to become a member of the Belvoir Park Golf Club....**

I agree that my membership of the club is to continue from year to year and, unless I give written notice to the Honorary Secretary of my intention to resign before December 31<sup>st</sup> in any one year, that I shall be liable to pay the Membership Fee for the succeeding year. I also agree to pay any Entrance Fee due at the date of acceptance in full or by agreement within the first calendar year of membership. I understand that should my membership application be successful I will be bound by the club's rules.

1. Surname Mr / Miss / Mrs / Ms.....

Christian Names .....

Address .....

.....

Post Code .....

2. Are you a **past** or **present** member of any other golf club **Yes / No** Will Belvoir Park be your home club? **Yes / No**

If No – Name of Home Club .....

Do you have an official Handicap ..... Handicap .....

3. Date of Birth .....

We use the information above to allow us to fulfil our contractual obligations to you as a member in accordance with our club's rules. We share the information with our external and internal Data Processors who adhere to our privacy policy.

We would also like to be able to correspond with you regarding our club's activities and in order for us to carry out this processing we require you to positively opt in by completing the boxes below.

*'I am happy for you to communicate with me regarding additional club activities via the following means'*

Post: Address as above

Email .....

Telephone .....

Mobile .....

We may also wish to share your information with the professional so that they may send you information about their products and services by email. If you agree to your information being shared in this way please tick the box

4. For which Category of Membership do you wish to apply? (Please Tick)

- |           |                          |                     |                             |
|-----------|--------------------------|---------------------|-----------------------------|
| SEVEN DAY | <input type="checkbox"/> | YOUNG ADULT (18-24) | <input type="checkbox"/>    |
| SIX DAY   | <input type="checkbox"/> | YOUNG ADULT (25-30) | <input type="checkbox"/>    |
| FIVE DAY  | <input type="checkbox"/> | SOCIAL MEMBER       | <input type="checkbox"/> ** |
| COUNTRY   | <input type="checkbox"/> |                     |                             |

**Application for Membership must be proposed and seconded by a 5, 6 or 7 day member of the Club and a Member of the Council. \*\*Social Membership must be signed by an Officer of the Club and by another Council Member.**

Name of Proposer \_\_\_\_\_ Name of Seconder\_\_\_\_\_

Membership number \_\_\_\_\_ Membership Number\_\_\_\_\_

Signature of Proposer \_\_\_\_\_ Signature of Seconder \_\_\_\_\_

Please note that completion of this application does not entitle you to membership of the club in any category. It will enable the Membership Committee to proceed towards further consideration of your enquiry but may be rejected by the council of the club in its absolute discretion and without assigning any reason therefore.

A copy of our clubs Privacy policy is available by request or can be viewed on our Website, but if you need further information please write to the Data Controller: The General Manager, at Belvoir Park Golf Club, 73 - 75 Church Road, Newtownbreda, Belfast, BT8 7AN

Signature of Applicant	.....
Date	.....

**MEMBERSHIP YEAR FROM 1<sup>ST</sup> JANUARY TO 31<sup>ST</sup> DECEMBER**

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