



I wish to become a Member of the Peterborough Milton Golf Club and I agree to be bound by the Rules and Bye-Laws of the Club.

Date of Application:

NAME in Full (please print)

Address (please print)

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.....Post Code:

Telephone: Home Business

Mobile:Email address.....

Occupation (please print) Company (please print)

Last Club..... Handicap (if applicable)

Type of Membership required:

Date of Birth:Signature:

Proposer:Seconder:

A **Letter of Application** is required from the Applicant, and **Letters of Introduction** from both the Proposer and Seconder (both of whom must have been Full Members of the Club for at least two years), together with a **Current Handicap Certificate (if applicable)**.

In the event of the Applicant being new to the area, a Letter of Introduction from the previous Club Secretary together with a Current Handicap Certificate will be considered.

Applications to be returned to: **The Secretary, Peterborough Milton Golf Club,
Milton Ferry, Peterborough, PE6 7AG**

OFFICE USE ONLY

Ack/D	Passed by Interview Committee	Displayed for Members	Advised of Acceptance	Subs Paid & Entered Ledger	Comp. No _____ H'Cap System Update _____
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