



LILLESHALL HALL GOLF CLUB

Lilleshall, Newport, Shropshire, TF10 9AS

Clubhouse: 01952 604776, Email: membersec@lhgolfclub.co.uk

Application for Membership

All information is given in confidence and is subject to Data Protection Legislation

Title and Full Name (Capitals please) _____

Address _____

Post Code _____

Date of Birth* _____ Email Address* _____

Telephone No.* _____ Mobile No.* _____

Type of Membership (Tick as appropriate)

<input type="checkbox"/>	Full
<input type="checkbox"/>	Young Adult: 19-21yrs**
<input type="checkbox"/>	Social
<input type="checkbox"/>	Off Peak (PM Only)

<input type="checkbox"/>	Full Intermediate: 29-35yrs**
<input type="checkbox"/>	Second Club
<input type="checkbox"/>	International
<input type="checkbox"/>	CASC***

<input type="checkbox"/>	Full Intermediate: 22-28yrs**
<input type="checkbox"/>	Away Club
<input type="checkbox"/>	5 Day
<input type="checkbox"/>	

How were you introduced to Lilleshall Hall Golf Club? _____

Present Club (If any) _____

Handicap (If any) _____ CDH No. (If any) _____

Previous Golf Clubs (If any) _____

- ☐ I agree to abide by, and comply with, the rules and Code of Conduct of Lilleshall Hall Golf Club.
- ☐ I authorise the Secretary of LHGC to make enquiries of any club of which I am, or have been, a member to obtain references.
- ☐ I understand that LHGC may refuse my membership application.
- ☐ I confirm that I have never been refused membership to any affiliated golf club, or
- ☐ I have not been subject to any disciplinary action at any golf club where I have been a member.
- ☐ I give my permission for the club to set my 'contact preferences' within the clubs Intelligent Golf software, such that the delivery of essential Announcements and Update emails is activated.

How do you wish to pay:

- ☐ Annual
- ☐ Monthly (Fees will apply)

I understand that all fees quoted are for 12 months membership howsoever paid and that the club year is 1st April - 31st March. Any cancellation of membership does not entitle me to a refund.

Signature _____ Date _____

*These must be completed **Proof of age required *** Please contact the club for more details T's & C's apply

