

**FAIRWOOD GOLF LIMITED**

Blackhills Lane, Fairwood, Swansea, SA2 7JN  
Tel/Fax: (01792) 297849 Email: info@fairwoodpark.com

**MEMBERSHIP APPLICATION (Block Capital Letters Please)**

Full Name

a) Mr.....

b) Mrs/Ms .....

Address

.....

..... Post Code.....

Tel: (Mobile) ..... Email Address .....

Tel: (Home) ..... Tel: (Business) .....

Occupation or Birthdate a) / /  
School or College ..... Birthdate b) / /  
(spouse/partner)

CLASS OF MEMBERSHIP REQUIRED – Please tick choice of category below:-

Full Golfing: Man..... Full Golfing: Lady..... Junior: .....

Husband & Wife: ..... Country: ..... Student:.....

Intermediate: ..... (Cheques should be made out to **Fairwood Golf Ltd**)

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Current Golf Club Previous Golf Club  
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Handicap If claiming a Current Handicap, confirmation from your  
..... present/previous Club should accompany this form).  
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Proposed (Print)..... Signature.....

Seconded (Print)..... Signature.....  
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New Members are required to present themselves before the Committee.  
You will shortly receive a letter from the Secretary, giving full details.

**ALSO NOTE:** ANY NEW MEMBER WITH NO GOLFING EXPERIENCE IS STRONGLY ADVISED  
TO SEE THE CLUB PROFESSIONAL REGARDING A SHORT COURSE OF LESSONS.  
ALL MEMBERS (IRRESPECTIVE OF EXPERIENCE) SHOULD STUDY, AND APPLY, THE  
SECTION IN THE CLUB PROGRAMME REGARDING ETTIQUETTE, AND TEE RESERVATIONS.  
THESE MUST BE OBSERVED, IN THE BEST INTERESTS OF ALL ON THE COURSE.  
I AGREE TO ABIDE BY THE CONSTITUTION & BYE-LAWS OF THE CLUB AND HAVE READ  
AND UNDERSTOOD THESE.

SIGNATURE a) SIGNATURE b)  
..... (Spouse/Partner) .....

**Fairwood Park Golf Club**  
***The Golf Committee***

**To be completed by all persons applying to join Fairwood Park Golf Club and returned to the Secretary.**

Full Name .....

Address .....  
.....  
.....

Tel No: ..... (Home)

Tel No: ..... (Business)

Email Address: .....

Have you previously been a Member of a Golf Club? Yes/No

If yes,

i. Current handicap (supported by certified evidence) .....

ii. If no current handicap  
last known handicap .....  
and Golf Club .....

I acknowledge that my handicap will not become valid until I have attended a new Members meeting and that this information, supplied by me, is true to the best of my knowledge and belief. Should it be declared otherwise I accept that my handicap and the result of any competitions entered will be invalidated.

Signed .....

Date .....

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For office use only

Date of notification to attend new members meeting ...../...../.....

Date attended new members meeting ...../...../.....

Handicap allocated and date ..... /...../.....

Club/Handicap Secretary ..... /...../.....