



# Silverknowes Golf Club

118 Silverknowes Road

Edinburgh EH4 5ET

Tel: 0131 336 5359 Clubhouse 0131 312 7088 Office



## New Member Application Form

Please complete and return to the Secretary at the above address

Full Name ..... Male Y/N Female Y/N

Address .....

Post Code ..... Telephone No .....

Date of Birth ..... Occupation .....

Proposer (Name) ..... Seconder (Name) .....

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

Signature ..... Signature .....

### Supplementary Questions

How do you know your proposer or seconder .....

Have you ever been a member of another Golf Club/s Y/N Name of Club/s .....

Do you have you a National Handicap Y/N Handicap .....

Have you ever been an Office Bearer at these Clubs Y/N Position .....

Do you currently play golf Y/N How often ..... per week ..... per month ..... per year

Have you ever visited Silverknowes Golf Club Y/N Do you know any other Club Members Y/N

**Type of Membership Requested** Full Membership Y/N Social Membership Y/N

### **Important:**

Both Proposer and Seconder must have at least three year's full membership of Silverknowes Golf Club and must not propose or second more than ONE other candidate. (Extract 4 of Constitution)

Date of receipt (Secretary's Office) ..... Waiting List .....