



Cheadle Golf Club

Membership Application Form

Introduced by

I desire to become a member of
Cheadle Golf Club in the following category – delete as appropriate.

FULL (MEN)
FULL (LADY)
RESTRICTED
SOCIAL

GRADUATE
JUNIOR (OVER 14)
JUNIOR (UNDER 14)
COUNTRY

If elected I agree to abide by the rules of the club, and to my name, address and telephone number being stored on computer disc.

I certify that the following particulars are correct:-

Surname

Christian names in full

Address

..... **Postcode**.....

Telephone number

Email

Profession or occupation

Date of birth

Name(s) of other golf clubs of which I am or have been a member:

.....

.....

Signed.....

Date.....

If you have any special skill or expertise which you are able to offer to the club we would be grateful if you could note these below.

Please return to membership box at club or to Membership Secretary, Cheadle Golf Club, Shiers Drive, Cheadle Road, Cheadle. SK8 1HW