



# THE DYKE GOLF CLUB LTD

## MEMBERSHIP PROPOSAL FORM

*Name* I ..... *Mr Mrs or Miss*

*Address* of .....  
.....*Postcode* .....

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

*Please circle  
Category of  
Membership required*

*Full 5-Day Twilight Winter County Junior Intermediate Club  
Select Social*

*apply for Full Membership of The Dyke Golf Club and I agree, if elected, to become a  
Member of the above mentioned Company and to be bound by the Memorandum and Articles  
of Association of the Company and the bye laws of the Club.*

*I understand that I am liable for the annual subscription upon renewal each year. If I wish  
to cancel my membership I may do so in writing by 1<sup>st</sup> April of the forthcoming subscription  
year.*

*Name of present club (if any) .....*

*Present Handicap .....*

*Telephone No: (Home) ..... (Business) .....*

*(Mob).....*

*E:mail :.....*

*Signed .....Date .....*

*Proposed by ..... Signature .....*  
*Capitals*

*Seconded by ..... Signature .....*  
*Capitals*

*Supported by ..... Signature .....*

*If you do not know anyone at the Club, please speak with the Manager who will be able to  
help you.*