**Application for Membership**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Post Code |  |
| Telephone no. |  |
| E-mail address |  |
| Date of Birth  |  |
| Occupation |  |
| Previous Club (if applicable) |  |
| Name of current club(Second club membership only) |  |
| Name of university / college / employer (Student/Apprentice membership only) |  |
| Scottish Golf Central Database Handicap (CDH) number  |  |

All cheques should be made payable to ‘Aberfoyle Golf Club’ or by BACS payment to

Account name – Aberfoyle Golf Club

Bank – Bank of Scotland

Sort code – 80-05-91

Account number – 00102202

**Please return the completed form to the secretary – Bob Carmichael, 5 Braeval, Aberfoyle FK8 3UY**

**For further information on multiple membership option, please contact the secretary on 01877 382751 or by email to secretary@aberfoylegolf.co.uk**