

HEACHAM MANOR GOLF CLUB ADULT MEMBERSHIP APPLICATION FORM

Title: **Surname:** **Forename:**

Address:

Town: **County:**

Postcode: **Tel No:**

Mob Tel No: **E-Mail Address:**

Date of Birth: __ / __ / __ **Handicap:** **No Handicap** (Please see rule 12)

I am a member of another golf club: Name of Club:

CDH Number:

I would like to make Heacham Manor my home club for handicapping purposes:

I have previously held membership at the following clubs golf clubs: No Previous Clubs:

Name of Clubs:

I have previously held a handicap of: No Previous Handicap:

How did you hear about Membership at Heacham Manor Golf Club?
.....

If introduced by member, please include member's name and membership number here:

..... Members Number:

I am happy to receive email correspondence from Heacham Manor Golf Club Please Tick []

I am happy to receive email correspondence about other Searles Leisure Group products Please Tick []

I am happy for Searles to share my email and date of birth to England Golf Please Tick []

Any personal data you give to us will be processed in accordance with the law and our privacy policy located on our website <https://www.heacham-manor.co.uk/ourpolicies>

I hereby apply for membership to Heacham Manor Golf Club. I have read the terms and conditions stated in the current Rules and agree to abide by them.

Signed: **Date:**

Membership applied for: (Please complete total column where appropriate)

MEMBERSHIP CATEGORY	COST	TOTAL
Annual Heacham Manor Membership (TO 30th APRIL 2024)		
Mens / Ladies Norfolk County and England Golf Affiliation fee	£24.00	Plus

Optional Searles Dual Membership:

MEMBERSHIP CATEGORY	COST	TOTAL
Dual Searles Membership (TO 30th APRIL 2024)		
TOTAL		

Please sign and return or email this completed form to golf@heacham-manor.co.uk.
Payment by BAC's to Sort Code: 20-47-15 Account number 00791164 Ref: HM (Surname)
Or contact the shop on 01485 536023.

OFFICE USE ONLY:

Please indicate with initials

HM BRS SUBS BILLS BR EMAIL CARD **BRS PIN**.....