## HEACHAM MANOR GOLF CLUB ADULT MEMBERSHIP APPLICATION FORM

QR251

Title: Surname:		
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: Nam CDH Number:		
I have previously held membership at the following Name of Clubs:		
How did you hear about Membership at Heachar		
If introduced by member, please include mem	umber: acham Manor Golf Club her Searles Leisure Group p birth to England Golf  d in accordance with the I nor.co.uk/ourpolicies  olf Club. I have read the terr  Date:	Please Tick [ ] Please Tick [ ] Please Tick [ ] Please Tick [ ]  aw and our privacy policy  ms and conditions stated in the
( TO 30th APRIL 2025)  Mens / Ladies Norfolk County and		Plus
England Golf Affiliation fee	£26.00	
Optional Searles Dual Membership:  MEMBERSHIP CATEGORY	COST	TOTAL
Dual Searles Membership ( TO 30th APRIL 2025)		
	TOTAL	
Please sign and return or email this completed form to Payment by BAC's to Sort Code: 20-47-15 Account no Or contact the shop on 01485 579825.  OFFICE USE ONLY: Please indicate with initials		
HM BRS SUBS BILLS BI	R EMAIL CARE	BRS PIN