

Virginia Golf Club Virginia, Co Cavan Tel (089) 212 8180

www.virginiagolfclub.ie mailto:vgcsecretary@gmail.com

Membership Application

APPLICANT INFORMATION					
Name:					
Address					
Mobile No.		Phone No.			
Email address:					
CATEGORIES					
	Please tick appropriate box				
	Full Member				
	Student Member (Ove				
Junior Member (Age 1		5-18)			
Juvenile Member (Age		8-14)			
Distance Member					
Country Member*					
	5-year Member*				
COUNTRY MEMBERSHIP					
*NOTE: Applicants for Country Membership must be current members of a Golf Club affiliated to Golf Ireland					
Name of Golf Club of which I am a current member:					
My current handicap is: My GolfIreland Membership No. is					
A copy of my Membership/Handicap is enclosed				Yes	No
Please be aware that if you choose to be alloc to other members of this Golf Club via MyGol					
I consent to share my details with Golf Ireland for the purpose of handicap administration and utilising the World Handicap System				Yes	No
APPLICANT SIGNATURE					
Signature of Applicant				Date	
Signature of Applicant					