**PORTADOWN GOLF CLUB**

**Portadown Golf Club**

**192 Gilford Road**

**Portadown**

**Co Armagh**

**BT63 5LF**



**Membership Application Form**

**(Confidential – when completed)**

|  |  |  |  |
| --- | --- | --- | --- |
| Title | Full Name | Name known by |  |
| DOB | Profession/Occupation | Would you like your business advertised on our Noticeboard? Yes/NO |  |
| Email address | Address | Contact numbers  Home  Work  Mobile | How would you like to be contacted?  Phone  Email  Text  Post |
| Are you a past or present member of any other club?  Yes/No | Name of club where you are or have been a member | Will Portadown be your home club?  Yes/No | Current handicap |

**CATEGORY OF MEMBERSHIP (Please tick the Category of membership you wish to apply for)**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Male/Female  7 day access | 6 day Male/Female  No access on a Saturday | 5 Day Male/Female  No access on a Thursday or a Saturday | Social |
| 1 Year Special  Male/Female | Young Adult 1 (19-25) M/F  State Age | Young Adult 2 (26-30) M/F  State Age | Student \*Must submit copy of student card\* M/F |
| Juvenile Under 11  M/F | Juvenile 11-18  M/F |  |  |
| 9 Hole M/F | 9 Hole 2 year Intro  M/F |  |  |
| Family 1 Full | Family 1-6 Day | Family 1-5 Day | Family 1 Year Special |

**Privacy Statement**

**Portadown Golf Club’s lawful basis for collecting and processing Members Personal information will be for the purpose of keeping you informed about events at the Club as part of your membership. This information will be used in the following ways:-**

* **For Administration purposes.**
* **To send member updates on the Club and its affairs by Email, Post, Phone, (as indicated above).**
* **All information kept on authorized Computers will be password protected.**
* **Members Personal information will be treated strictly confidential and will not be passed to any third parties.**
* **Members data will not be sent to countries outside the EU.**
* **The Member is entitled to notify the Club at any time that they do not wish to receive any further communications this will be complied with within 30 days.**
* **The Member has the right to request the Club to be given a copy of any details held about them.**

**\*I CONFIRM THAT THE INFORMATION SUPPLIED ON THIS FORM IS ACCURATE AND CORRECT.**

**I CONSENT TO MY DATA BEING USED FOR MEMBERSHIP PURPOSES AS DETAILED ABOVE**

**APPLICANT’S SIGNATURE........................................DATED..........................................**

**Election Criteria**

**We the undersigned believe the above named Candidate to be suitable for election to Portadown Golf Club**

**Proposer’s Name.............................................. (must be a member of Council) Signed..............................…....Dated……………….**

**Seconder’s Name........................................(must be a current member of the Club) Signed...................................Dated...............**