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2014 CORPORATE MEMBERSHIP FORM

COMPANY NAME:

VAT NUMBER:

ADDRESS:

POST CODE:

NOMINATED MEMBER 1

FULL NAME:

DOB:

PERSONAL ADDRESS:

POST CODE:

E MAIL:

MOB:

Have you been a member at another Golf Club? **Y/N**

If so, which club?

Previous Handicap:

Will Pitlochry Golf Club become your home club? **Y/N**

Applicant Signature

Desire to become a member of Pitlochry Golf Club; you agree to be bound by all the obligations and conditions of the current rules, bye laws and regulations of said club.

NOMINATED MEMBER 2

FULL NAME:

DOB:

PERSONAL ADDRESS:

POST CODE:

E MAIL:

MOB:

Have you been a member at another Golf Club? **Y/N**

If so, which club?

Previous Handicap:

Will Pitlochry Golf Club become your home club? **Y/N**

Applicant Signature

Desire to become a member of Pitlochry Golf Club; you agree to be bound by all the obligations and conditions of the current rules, bye laws and regulations of said club.

OFFICE USE ONLY-----

Proposer Name:

Proposer Signature:

Date:

Proposer Name:

Proposer Signature:

Date:

Seconder Name:

Seconder Signature:

Date:

Seconder Name:

Seconder Signature:

Date: