

Lothianburn Golf Club

106A Biggar Road, Edinburgh, EH10 7DU

Secretary: John Melrose
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MEMBERSHIP APPLICATION FORM

Please use **BLOCK LETTERS**

Name (Mr / Mrs / Miss / Ms) _____

Address _____

Postcode _____

Home Telephone _____ Mobile Phone _____

Email Address _____

Occupation _____

Other or Previous Clubs _____

Type of Membership required (please tick)

Ordinary	<input type="checkbox"/>	Young Adult	<input type="checkbox"/>
5-Day	<input type="checkbox"/>	2 nd Club	<input type="checkbox"/>
Student	<input type="checkbox"/>	Junior	<input type="checkbox"/>
Senior	<input type="checkbox"/>	Winter	<input type="checkbox"/>
Country	<input type="checkbox"/>	House	<input type="checkbox"/>
Combined Husband & Wife	<input type="checkbox"/>	Family – please give names & dobs overleaf	<input type="checkbox"/>

Where did you learn about membership at Lothianburn Golf Club? Please tick

- An existing member
- Club website
- Club poster/notice
- Visit to course
- Visitors day
- Press / magazine advert
- Other (please state)

Signature of Applicant (Parent or Guardian in case of Junior)

Date / / 2012 Date of Birth / /

Card payments (Cards accepted are Mastercard, Maestro and VISA)

Card Type: DEBIT / CREDIT (please delete whichever is inapplicable)

Card Number : _____

Valid from : _____ Valid to : _____ last three digits on signature strip _____

FOR OFFICIAL USE

Received on ___/___/___ Acknowledged on ___/___/___ Payment received ___/___/___

Council Reviewed on ___/___/___ Applicant notified on ___/___/___ Accepted / Declined

Date of entry to Club ___/___/___