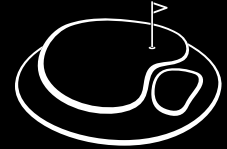


# GOLF MEMBERSHIP FORM

01/04/23 to 31/03/24



Please write clearly in the white spaces with capital letters or cross the boxes. It is important that you have read and understood all the club rules and the terms and conditions before signing.

## 1 Personal Details

Title	Mr	Mrs	Miss	Ms	Other (please specify)	Date Joined	Membership Number (office use only)	
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>N O R</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
First line of address	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
Second line of address	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
City or Town	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
County	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
Post code	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		Country (if not UK)					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
E-mail address	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
Mobile number	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			Occupation				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Date of Birth	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		Are you a member of another golf club? If so which one?					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

## 2 Type Of Membership

Please indicate the type of membership you require by crossing the relevant box.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Junior (17 and under)<br>£180 PA              | <input checked="" type="checkbox"/> 5 Day Adult (30 and over)<br>£480 PA / £45 DD   |
| <input checked="" type="checkbox"/> Intermediate A (18 to 24)<br>£350 PA / £32 DD | <input checked="" type="checkbox"/> 7 Day Family (2 people)<br>£1080 PA / £97.50 DD |
| <input checked="" type="checkbox"/> Intermediate B (25 to 29)<br>£450 PA / £40 DD | <input checked="" type="checkbox"/> 5 Day Family (2 people)<br>£880 PA / £80 DD     |
| <input checked="" type="checkbox"/> 7 Day Adult (30 and over)<br>£605 PA / £55 DD | <input checked="" type="checkbox"/> Other<br>Please specify:                        |

The Key points of the agreement you are making are :

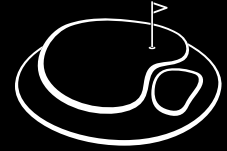
- Memberships paid by monthly direct debit have a minimum commitment period of 12 months and will continue after this period unless and until you ask us to cancel your membership per the cancellation policy within the terms and conditions.
- Monthly paid memberships require a minimum commitment period. Cancellations are NOT permitted until the initial 12 month commitment period has elapsed.
- Annually paid memberships expire after the period stated on your confirmation email.
- Price reviews – Fees may change from time to time (even within the commitment period) and we will give you 1 month's notice of change in writing.
- Cancellations – All cancellations after the initial 12 month commitment period require at least one full calendar month's written notice.

**NB. All the above memberships are subject to an additional affiliation fee which will be charged as set by the English Golf, Norfolk Golf and Norfolk Ladies County Golf Association. Men £21, Ladies £19. Affiliation fees are due annually and will be added to the Direct Debit accordingly. All memberships are a 12 month agreement. For Direct Debit payments, one month payment will be required (as well as any remaining days of the month) on the date of sign up.**

Please indicate the payment method you prefer by crossing the relevant box. Refer to the Terms & Conditions for more details (section 6,7 &8) .

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Monthly (direct debit, for a minimum term of 12 months) | <input checked="" type="checkbox"/> Annually (payment is made in one lump sum, for a term of 12 months) |
|---|---|

**MINIMUM OF 12 MONTHS MEMBERSHIP**



### 3 Assumption Of Liability

It is understood that Norfolk Premier Golf shall determine the Membership subscriptions which will be charged to all the Members of the Club. Membership of the Club does not confer upon me any ownership of or liability for the property and assets owned by the Club. I agree that I am personally liable for the payment of the applicable Membership subscriptions and charges incurred by myself, family and guests in the use of amenities at Norfolk Premier Golf.

This application for Membership and the Terms and Conditions contained herein supersedes any agreement that may have previously existed.

Signature

Parent/Guardian Signature

Date

(Where the member is under the age of 18 years of age, Parent or Guardian must sign as a Guarantor).

### 4 Office Use Only

Membership Number

Date Joined

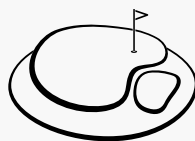
     

Pro Rata Paid

 £ 

CONGU Fee Paid?

Additional Information



**NORFOLK PREMIER GOLF**

B L O F I E L D

*passionate about your game*

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[www.norfolkpremiergolf.co.uk](http://www.norfolkpremiergolf.co.uk)  
[info@norfolkpremiergolf.co.uk](mailto:info@norfolkpremiergolf.co.uk)

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