



Brighton & Hove Golf Club
Devils Dyke Road
Brighton
East Sussex BN1 8YJ

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2017 Membership Application Form

Surname.....Forename/s.....

Address.....

.....Post Code.....

Tel Home.....Tel Work.....

Mobile.....

Email.....

Occupation.....Date of Birth.....

Other Club(s).....Handicap.....

TYPE OF MEMBERSHIP

(Please circle one)

7-DAY 5-DAY INTRODUCTORY OFFER INTERMEDIATE / STUDENT

FLEXIBLE JUNIOR LOW INCOME ASSOCIATE COUNTRY

TWILIGHT WINTER SOCIAL ACADEMY PACK

If accepted for membership, I will abide by the rules of the Club, and agree/do not agree (please delete one) to the Club using my name, address and telephone number in Club publications such as the Members' Diary and to receive information such as Club news and notifications by email.

Signed by the Applicant.....Date.....

Introduced by (if applicable).....