



# DELGANY GOLF CLUB

## Membership Application

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation/Place of Work (or College): \_\_\_\_\_

D.O.B. \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

I wish to apply for (Select type of membership as appropriate)

Ordinary (Full) [  ]    **Term** Ordinary (Full) [  ]    5 Day [  ]    **Term** 5 Day [  ]

Intermediate [  ]    Student [  ]    Overseas/Country member [  ]

Clubhouse (*Playing*) [  ]    Clubhouse (*Non Playing*) [  ]    **Student** [  ]

### Golf History

Are you currently a member of a Golf Club                      **Yes** [  ]                      **No** [  ]

***If "yes" please give details***

Name of Club: \_\_\_\_\_ Membership Category: \_\_\_\_\_

Golf Ireland Number: \_\_\_\_\_ Current Handicap: \_\_\_\_\_

Home Club will be:      Delgany Golf Club [  ] or the club specified above [  ]

***If "no"***

Have you previously been a member of a Golf Club                      **Yes** [  ]                      **No** [  ]

Name of Club: \_\_\_\_\_ Membership Category: \_\_\_\_\_

Lowest Handicap Held: \_\_\_\_\_ Initial Handicap Allotted: \_\_\_\_\_

Date of Leaving: \_\_\_\_\_

***If "no"*** Have you played Society Golf                      **Yes** [  ]                      **No** [  ]

If "yes" give details and handicap held: \_\_\_\_\_

### Data Protection:

Delgany Golf Club is committed to protecting your privacy and adheres to the principles of data protection as set out in GDPR legislation. A full copy of our Data Protection Statement is available on request from the club office.

**Should your application not be successful at this time the details provided will be held for up to 3 months after which it will be destroyed.**

Data for successful applicants will be maintained for as long as you remain a member of the Club.

**Essential Activity:** As a Club Member you will from time to time receive notifications directly related to your membership by phone and electronic applications. These will include renewal notices, booking confirmations, competition details, results, and other general information.

As part of "Essential Activity" Delgany Golf Club will share your details with certain outside organisations including **Golf Ireland** (for membership and maintenance of Handicap details), **BRS** (For booking of Golf) and **Club Systems** (our system for membership administration, competition entries and results and Handicap records), **Club Professional** (for operation of your account in Pro-Shop), **Insurance Company** (where you have opted for Insurance).

**Other Activity:** From time to time the Club will also send information on upcoming social activities, functions, fundraising and other events not directly concerned with Golfing activity.

**Do you consent to receive notifications regarding "Other Activity" from the Club?**

**YES** [  ] **NO** [  ] *(you can at any time change your preference by contacting the club office)*

## Declaration

I wish to apply for membership of Delgany Golf Club and, if elected agree to observe all Rules and Regulations of the Club. The information provided above is true and I have considered and agree to the Data Protection principles as operated by the Club. No application by me for membership of a Golf Club has been declined.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

## Proposer and Seconders

The Proposers and Seconders must be Ordinary (Full) members of not less than 2 years standing.

Proposer (Block letters): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Seconder (Block Letters) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Seconder (Block Letters) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only:

Date received: \_\_\_\_\_ Date membership Meeting: \_\_\_\_\_

Decision: \_\_\_\_\_ Date of Acceptance: \_\_\_\_\_