



Westgate and Birchington Golf Club
176 Canterbury Road, Westgate-on-Sea, Kent CT8 8LT
Tel: 01843 831115 Email: office@wabgc.co.uk
website: www.westgate-and-birchington-golfclub.co.uk

MEMBERSHIP APPLICATION

Surname _____ Forenames _____ Title _____

Address _____

Postcode _____

Telephone (Home) _____ Telephone (Work) _____

Mobile _____ Email Address _____

Date of Birth _____ Occupation _____

Previous Club (s) _____

Brief details of your golf experience and details of your handicap record _____

Handicap (if any) _____ Issuing Club (Attach Certificate) _____

Will Westgate and Birchington be your Home Club for your handicap? Yes / No _____ EGU CDH Number _____

Introduced by* Print Name _____

Signature _____

*This is only applicable when the Club is running an incentive scheme for members to introduce new members.
Applicants may apply without an introducer the membership is open without discrimination for further information please contact the club secretary

Type of Membership Full Country Joint Joint Country Second Club Social
Age 26 – 29 Age 21 – 25 Under 21 Under 18 Under 13 Under 8

I wish to apply for membership of Westgate and Birchington Golf Club and agree to abide by the Clubs' rules and by-laws if elected.

Applicant's Signature _____ Date _____

PLEASE COMPLETE AND RETURN TO THE CLUB SECRETARY

For Office use only

Date received _____ Date processed _____ Date Completed _____

Welcomed by _____ Remarks _____

Membership Start _____ Entrance Fee _____ Subscription _____

Clubminder Number _____ Card Number _____ Handicap Master _____