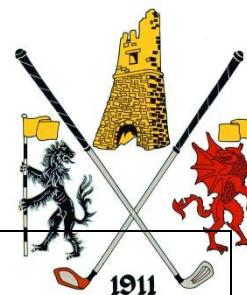


PLEASE COMPLETE THIS FORM AND RETURN WITH YOUR PAYMENT



Member's Full Name	
Central Database Handicap Number	
Subscription category	
Buggy storage fee (Please provide a copy of a valid Insurance Policy)	
Unlimited personal use of a Club Buggy	
Locker fee (Please state locker number)	
Trolley shed	
100 Club	
Sub total	
Value of competition vouchers redeemed	
Volunteers discount	
Total	

IMPORTANT

I confirm that I have received a copy of the Club's Buggy Risk Assessment Document, Fog Policy and Health and Safety Policy.

I confirm I have been strongly advised to arrange comprehensive personal golf insurance.

Member's signature

TOTAL AMOUNT RECEIVED £

METHOD OF PAYMENT CASH/DEBIT CARD/DIRECT TRANSFER/ZEBRA FINANCE

OFFICE USE ONLY

TOTAL RECEIVED

VALUE DEDUCTED FROM MEMBER'S COMPETITION ACCOUNT £ Date adjusted

Name Signature Date received