## Tuam Golf Club

## Membership Application Form



**Telephone**: 093-28993 **Mobile**: 089-4036387

**Email**: tuam.golfculb@outlook.com **Web**: www.tuamgolfclub.com

Name:		
Address:		
Email:		
Mobile:	Telephone	:
Do you hold a current handi	cap? Yes No	
Have you ever held a handid	cap? Yes No	
If yes, what was it and where	e was it? <b>Handica</b>	p Club
Emergency Contact Name:		Emergency contact Number:
Membership Categorie Please choose one:	es	
GDPR		
in accordance with this podata for Club related anno routine activities necessary	licy and will not ouncements and pro	cy. Your personal data will be stored and use be shared with third parties. We will use thi emotions, member engagement and feedback and othe of our club. Please indicate your consent for thi plicy
Please note that all such as set out in our constitution		are subject to our club rules and regulations available on request.
Please feel free to email details are located at the	your application top of this form.	o us or send it via WhatsApp. Our contact
		Date:
For Office Use Only		
Proposed By:		Seconded By:
Date Ratified:		