



Name:

Address:

Email:

Mobile:

Phone:

Date of Birth:

Do you hold a current handicap? Yes No

Have you ever held a handicap? Yes No

If yes, what was it and where was it? **Handicap**

**Club**

Emergency Contact Name:

Emergency contact Number:

## Membership Categories

## GDPR

*Tuam Golf Club has a Data Privacy Policy. Your personal data will be stored and used in accordance with this policy and will not be shared with third parties. We will use this data for Club related announcements and promotions, member engagement and feedback and other routine activities necessary for the running of our club. Please indicate your consent for this by checking this box. See Golf Ireland for their complete Privacy Policy.*

*Please note that all successful applicants are subject to our club rules and regulations as set out in our constitution, a copy of which is available on request.*

Please feel free to email your application to us or send it via **WhatsApp**. Our contact details are located at the top of this form.

Handwritten Applicant Signature:

Date:

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### For Office Use Only

Proposed By:

Seconded By:

Date Ratified: