ROYAL ASCOT GOLF CLUB

Winkfield Road . Ascot . Berkshire. SL5 7LJ

General Manager: 01344 625175
Facsimile: 01344 872330
Email: admin@royalascotgolfclub.co.uk
Website: www.royalascotgolfclub.co.uk

Application for Membership

PLEASE COMPLETE IN BLOCK CAPITALS:

Full Name Mr/Mrs/Ms/Miss……. …….....……..

Address …….....…….

…… Postcode: …….....…….

Date of Birth: …….....… Occupation: …….....……

Telephone No: ……...…….……...Mobile No: …….…….....…

Email Address: ...……..…….....……..

Please Indicate Type of Membership required:

Adult 7 Day		**Adult 5 Day**		**Young Adult 30-35**		**Young Adult 24-29**	
Young Adult 18-23		**Junior 10-17**		**Academy**		**Overseas** **Country of Residence**	
Social							

If young adult - 5 Day 7 DAY (delete as appropriate)

Please provide details of your golf experience (Including details of your current or previous clubs)
Please indicate if Royal Ascot Golf Club is to be your Home club Y/N (if No, name and address of your Home club)
Overseas Membership requires name and address of your Home Club

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Handicap (*If any*) …… Issuing Club ……CHD No…….

Optional: Proposed by: Print name: ……Signature:…….….....

Note: Proposer must be current member of RAGC.

I have read, understood and will comply with the conditions of membership and dress code as required by The Club

Signature Date

***Office Use Only*:**

Date Received: …… …..... Interview date/time : …… Interviewed by: .....

Type of Membership Offered: …….. …….. .... Date Offered: ……. Date Payment received: …….

VAT Registered Number : 208 1850 78