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Ardglass Golf Club

Castle Place, Ardglass, Co. Down, Northern Ireland BT30 9TP

Application for House Membership

Personal Details.

Full Name _____

Date of Birth _____

Address : _____

Post Code _____

Home Telephone Number _____

Mobile Telephone Number _____

Email Address _____

Do you want your details added to the Club's marketing list? Yes No

***Proposed By** _____ **Signed** _____

***Seconded By** _____ **Signed** _____

Declaration

I undertake that, if elected as a house member of Ardglass Golf Club, I will abide by the rules and by-laws of the Club and pay my subscription (including any levies which may be applied) by the due date.

Signed

Date