Photo Required



APPLICATION FORM FOR MEMBERSHIP

| CLASS OF MEMBERSHIP APPLIED FOR SPECIFYI | NG ORDER OF PREFEREN | CE (1, 2 OR 3) | |
|---|------------------------|---------------------------------------|--|
| FULL SIX DAY | | | |
| INTERMEDIATE (19-30YRS)COUNTRY | /OVERSEAS | PAVILION | |
| FULL NAME: | | | DATE OF BIRTH: |
| ADDRESS: | | | |
| TELEPHONE: HOME: | | MOBILE: | |
| EMAIL ADDRESS: | | | |
| FULL NAME OF EMPLOYER/SELF EMPLOYED: | | | |
| POSITION HELD: | | | |
| PRESENT GOLF CLUB: | | | HANDICAP: |
| GOLF IRELAND NUMBER: | | | |
| PLEASE NOTE THA | T PAVILION MEMBERS ARE | NOT PERMITTED TO HAVE A | A CLUB ADMINISTERED HANDICAP |
| OTHER CLUB MEMBERSHIPS: | | | |
| SIGNATURE OF CANDIDATE: | | | DATE: |
| | TO BE COI | MPLETED BY PROPOSERS | |
| NAME OF PROPOSER (1) | | | (PLEASE PRINT) |
| SIGNATURE OF PROPOSER 1 : | | | YEAR OF ELECTION: |
| *RELATIONSHIP TO CANDIDATE | | | HOW LONG KNOWN |
| NAME OF PROPOSER (2) | | | (PLEASE PRINT) |
| SIGNATURE OF PROPOSER 2 : | | | YEAR OF ELECTION: |
| *RELATIONSHIP TO CANDIDATE | | | HOW LONG KNOWN |
| NAME OF PROPOSER (3) | | | (PLEASE PRINT) |
| SIGNATURE OF PROPOSER 3 : | | | YEAR OF ELECTION: |
| *RELATIONSHIP TO CANDIDATE | | | HOW LONG KNOWN |
| PLEASE NOTE THAT PROPOSER 1 N | /IUST ALSO PROVIDE A L | ETTER STATING THEIR P | ERSONAL KNOWLEDGE OF THE APPLICANT |
| | | · · · · · · · · · · · · · · · · · · · | not to be taken lightly. The onus is on the Proposers to ensure ffirm this by signing this document. |
| DISCOUNTS ON FEES MAY BE AVAILABLE TO FA THAN PROPOSERS) | MILY MEMBERS. PLEASE | INDICATE FAMILY RELAT | TIONSHIPS WITH OTHER MEMBERS OF THE CLUB (OTHER |
| NAME OF MEMPER. | | * DEL ATIONICI IID TO | CANDIDATE |

^{*}RELATIONSHIP TO CANDIDATE: Family (husband, wife, son, daughter, son/daughter in law, grandchild), Friend, Personal Acquaintance, Business Colleague.

EXPLANATORY NOTES

COMPLETED APPLICATION FORM MUST BE RETURNED TO THE GENERAL MANAGER'S OFFICE NO LATER THAN 31ST JANUARY

CANVASSING BY PROPOSERS OR APPLICANTS IS PERMITTED BUT CANVASSING MUST CEASE AT THE END OF FEBRUARY TO ALLOW THE BOARD SUFFICIENT TIME TO REVIEW EACH APPLICATION IN DETAIL AND TO FOCUS ON THE ELECTION PROCESS. NO TELEPHONE CANVASSING IS PERMITTED.

IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT THE APPLICATION FORM IS COMPLETED IN FULL

A candidate for election as a Full Member or Six Day Member must be nominated by three persons who are either Full Members, Senior Members, Senior Members (2000), Honorary Members, Six Day Members, Senior Six Day Members, Senior Six Day Members. A candidate for election to any other class or category of member for which elections are required must be nominated by two persons who are either Full Members, Senior Members, Senior Members (2000), Honorary Members, Six Day Members, Senior Six Day Members, Senior Six Day Members.

In all such cases the nominating member must have been a voting member of the Club for a period of not less than three consecutive years on the first day of the subscription year in which the nomination occurs. The completed application form of each such candidate shall be submitted to the General Manager and summary details, namely candidate's name and name of proposers, shall be posted on an appropriate notice board in the clubhouse of the Club (the "Clubhouse") and/or posted on the website of the Club for a period of at least fourteen days prior to the date of the ballot by the Board.

MEMBERS MAY NOT PROPOSE MORE THAN TWO APPLICANTS FOR EACH MEMBERSHIP CLASS. FOR THIS PURPOSE 6 DAY AND FULL ARE CONSIDERED ONE CLASS

MEMBERS OF THE BOARD & SCREENING COMMITTEE ARE NOT PERMITTED TO SIGN APPLICATION FORMS.

FOR OFFICE USE ONLY

Completed Application received by the Club on:

Data Protection

The information you provide in this form will be used solely for dealing with you as a member of Castle Golf Club. The club has a Data Privacy Policy which can be found at www.castlegc.ie. Your data will be stored and used in accordance with this Policy.

Date.....

| The Club maintains a membership directory in the member section on www.castlegc.ie . This would include member's name, email addresses, phone/ mobile number and handicap. |
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| If you consent to your data being shared in this way, please tick here. |
| The Club may arrange for photographs or videos to be taken of Club activities and published on our website or social media channels to promote the Club. If you consent to your image being used by the Club in this way, please tick here. |
| If you wish to withdraw consent at any stage, please contact, General Manager, Castle GC at gm@castlegc.ie. |
| Signature |