



# Davyhulme Park Golf Club

## MEMBERSHIP APPLICATION FORM

I .....(enter name)

Desire to become a 7 day, 6 day, introductory 5 day, Lady or Junior  
(please delete as necessary)

Full Name .....

Address .....

..... Post Code .....

Telephone Number ..... Mobile .....

Email Address .....

Business/Profession/Occupation .....

Name of other/previous Golf Clubs .....

Handicap (if any) & Date .....

Date of Birth .....

Signature of Candidate ..... Date .....

Applicants please note : If you have been introduced to Davyhulme Park Golf Club by an existing member please enter their details below.

Name of existing member .....

Address of existing member .....

.....

Where did you hear of us, website, messenger newspaper, recommend a friend, other.

.....

Tel: 0161 748 2260

Address: Davyhulme Park Golf Club, Gleneagles Rd, Davyhulme, Manchester, M41 8SA

Web: [www.davyhulmeparkgolfclub.co.uk](http://www.davyhulmeparkgolfclub.co.uk) Email: [info@davyhulmeparkgolfclub.co.uk](mailto:info@davyhulmeparkgolfclub.co.uk)