



# Torphins

Golf Club

Bog Road

Torphins

Banchory

AB31 4JU

**APPLICATION FOR MEMBERSHIP**

**AUTUMN/WINTER OFFER**

**FROM NOW UNTIL 31<sup>ST</sup> MARCH 2025**

(PLEASE COMPLETE ALL SECTIONS)

SURNAME (Mr/Mrs/Miss/Ms/Other).....

CHRISTIAN NAMES(s) .....

ADDRESS .....

.....POST CODE.....

HOME TELEPHONE NO.....MOBILE TELEPHONE NO.....

EMAIL ADDRESS.....DATE OF BIRTH ...../...../.....

I agree to my email address being added to The Club Secretary's emailing list Please tick

Category of Membership(Please indicate)      Tick

**FULL MEMBERSHIP**      **£ 125.00**

**Young Adult 18 -30**      **£ 50.00**

**Junior 16 -17**      **£ 15.00**

**Junior under 15**      **£ 10.00**

WILL TORPHINS GOLF CLUB BE YOUR HOME CLUB ?YES/NO

IF NO, PLEASE STATE YOUR HOME CLUB .....

CDH NUMBER (if applicable) ..... 10 digits

CURRENT HANDICAP (if applicable) .....

I agree to abide by the constitution and rules of the golf club at all times.

We need to collect our member's personal information, so we can manage your relationship with us.

Please visit our website [www.torphinsgolfclub.co.uk](http://www.torphinsgolfclub.co.uk) to read our privacy policy and see how it affects you.

Signature..... Date .....

**PLEASE RETURN YOUR COMPLETED FORM TO THE TREASURER:**

**GRAHAM YOUNG**

**21 BRAECROFT DRIVE, WESTHILL, ABERDEENSHIRE. AB32 6FF**

**TELEPHONE: 01224 743108 MOBILE: 07950 362908**

**E-MAIL: [grahamyoung409@gmail.com](mailto:grahamyoung409@gmail.com)**