



Macreddin Golf Club Academy Membership Application Form 2018

Membership Categories

6 Months - €120

12 Months - €200

Membership Category:

6 Months 12 Months (Please tick one)

Personal Details:

Forename: _____ Mobile: _____
Surname: _____ Email: _____
Address: _____

I agree that my name, telephone number(s) and e-mail address can be made available to other members by way of list in the club and/or website.

I agree to abide by the Rules of Macreddin Golf Club, by the Constitution of Macreddin Golf Club, and the Constitutions of the GUI/ILGU and it's Leinster Branch/Mid Leinster Region Respectively.

I accept the decision(s) of the Course Operator / The Committee / The GUI/ILGU respectively as final and binding in all matters relating to membership of Macreddin Golf Club and the GUI/ILGU.

I agree to and understand the payment terms and conditions.

Signed: _____ Date: _____