

Application for membership 2017

Please complete in block capitals and also overleaf for Junior Applicants

Title Date

Name

Postal Address *E-mail address

..... *Telephone (land line)

..... *Telephone (mobile)

Post code

Occupation Date of birth

Other golf clubs

Will Lumphanan be your home club for handicapping purposes (Y/N)

Current handicap CDH Number (if holding a handicap)

Signature of applicant

***I hereby agree to my e-mail address being shared with other members of Lumphanan Golf Club and to my telephone number(s) being shared with members of the Committee, both for club purposes only**

Signed

The following is the fee structure for 2017:

Playing members (no joining fee)*:

Adults: £190 + £10 bar voucher = £200

Seniors (65 years+ on 1 January 2017): £130 + £10 bar voucher = £140

Life members: £10 bar voucher

Honorary members: no fee payable

Complimentary playing members: no fee payable

Young Adults (18 – 21 years at 1 January 2017): £90 + £10 bar voucher = £100

Juniors (16 – 17 years at 1 January 2017): £55 – **complete consent form**

Juniors (under 16 years on 1 January 2017): £40 – **complete consent form**

Family membership – two adults and their children aged 17 years and under at 1 January 2017: £420 – **complete individual form for each applicant together with a consent form for each child**

Non-playing members:

Honorary members: no fee payable

Social members: £10 + £10 bar voucher = £20

Lockers: the annual rental fee is £10 which is payable in addition to the above by those members who have a locker.

*For playing members, the club is required to pay the following Affiliation Fees –

For each playing Gent and Lady a payment of £11.25 to Scottish Golf Limited, and £2.10 to the North East District Association for each playing Gent. There are no equivalent payments for Juniors or Non-playing members.

Members who introduce new members (Full and Senior Adult members paying the full membership fee) to the club may claim a £30 bar voucher or a £30 voucher towards membership fees for 2018. A member wishing to claim either of these incentives should contact the Secretary directly.

Fees may be paid by cash, cheque or bank transfer.

If paying by bank transfer, the club details are as follows:

Account Name: Lumphanan Golf Club Sort code: 82 61 00 Account Number: 50382933

When transferring funds by direct bank transfer in the *Reference* section please put your name as it appears on your bank account and in the *Remitter name* section please use your surname and thereafter return this form, e-mail or phone the Secretary so that the membership documentation may then be processed.

Please consider making payment by bank transfer as this is the most cost effective method of payment for the club since payments made this way do not incur any bank charges.

Cheques should be made payable to **Lumphanan Golf Club**.

Please return this form and payment to the Secretary, Joyce Wilson, 9 Gordon Road, Aberdeen, AB15 7RY.

Lumphanan Golf Club

Medical consent form and consent for use of photographs, film, or video recordings of children (under 18 years of age on 1 January 2017)

Name of child: Date of birth

1. Consent to medical treatment

The following information and consent is requested to ensure the health and wellbeing of all children participating in Lumphanan Golf Club activities. The information contained in this form is confidential and will only be used to safeguard and promote the child's health and wellbeing should the need arise.

Name of general practitioner

Address

Telephone

Please provide details of any pre-existing medical conditions that may affect the child's participation in the activity/event/programme:

Details of any medication or treatment required

Details of any existing injuries (including when injury occurred and the treatment received)

Details of any allergies, including allergies to medication

Parent/Guardian/Legal Carer

I, [insert name of parent/guardian/carer] consent to the above-named child receiving medical treatment, including anaesthetic, which the medical authorities present consider necessary.

I undertake to inform Lumphanan Golf Club should any of the information contained in this form change.

Signature **Print name**

Relationship to child

Date

2. Photographic consent

I, [insert name of parent/guardian/carer] consent to Lumphanan Golf Club photographing, filming or videoing the above-named child's involvement in Lumphanan Golf Club activities. Such filming or photography may be used for the purpose of clubhouse photographs, newspaper sporting articles and promotion of Lumphanan Golf Club.

Signature **Print name**

Relationship to child

Date