



DRUIDS HEATH

DRUIDS HEATH MEMBERSHIP APPLICATION FORM

Name		Date of Birth	
Address		Home Phone	
		Work Phone	
		Mobile	
Occupation		E-mail	

Please supply ALL of the above information

Are you a current member of a golf club? Yes No

If Yes, please outline your current club name and you Golf Ireland number: _____

Do you Nominate Druids Heath as your home club? _____

Druids Heath Golf Club has a contact messaging system. The club will send emails to members about course information, closures, events etc. Druids Heath reserve the right to send emails to members.

I wish to apply for:

Full 7 Day Membership	Annual Fee	€1,590.00	<input type="checkbox"/>
7 Day Couples Membership	Annual Fee	€2,750.00	<input type="checkbox"/>
Over 65's 7 Day Membership	Annual Fee	€1,431.00	<input type="checkbox"/>
7 Day & Health Club Membership	Annual Fee	€1,880.00	<input type="checkbox"/>
7 Day & Spouse Gym Membership	Annual Fee	€2,000.00	<input type="checkbox"/>
Under 30's Membership	Annual Fee	€1,100.00	<input type="checkbox"/>
5 Day Membership	Annual Fee	€1,050.00	<input type="checkbox"/>

Payment:

Method:	Comment:	Additional Charges:
Cash/Credit/Debit Card		None
Cheque		None
Online Transfer		None
Fairway Credit		6 or 10 month plans available

Declaration to be signed by applicant

I the undersigned wish to apply for annual membership of Druids Heath Golf Club. I agree that this application for membership shall not be binding on Druids Heath Golf Club until the application has been approved and the appropriate entrance fee and annual subscription paid in full (*Any unsuccessful applicants will have their cheque immediately returned*). By signing below, you agree to the constitution of the members club.

Signature of Applicant _____ Date _____