



LOFTHOUSE HILL GOLF CLUB

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Surname: _____

Christian Name: _____

Date of Birth: _____

Address: _____

Email Address: _____

Postcode: _____

Telephone Home: _____ Work: _____

Occupation: _____

Type of Membership: _____

Date Applied: _____

Previous Clubs: _____

Handicap: _____

Position(s) held at previous clubs: _____

Date: _____

Signed: _____