Mane can ar	p Application Proposal Form
Surname:	
Forenames:	
Address:	
Felephone No:	Date of Birth://////
Email:	
Occupation:	
Employer's Name	
Category of Membership applied for:	
Are you, or have you ever been a member of a Golf Cl	ub? Yes/ No:
f Yes, please state name of Club	
f Yes, please enter your Golf Ireland Number	
Lowest Handicap Current	WHS Handicap Index
A copy of your last detailed handicap certificate fro	m Golf Ireland will be required
If No: Are you, or have you ever been a member of a Golf So	ciety? Yes/ No
	•
Are you, or have you ever been a member of a Golf So f Yes, please state name of Society	•
Are you, or have you ever been a member of a Golf So f Yes, please state name of SocietyCowest Society Handicap:C	Current Society Handicap:
Are you, or have you ever been a member of a Golf So f Yes, please state name of SocietyC Lowest Society Handicap:C Do you have any relatives who are members of Wicklo	Current Society Handicap:
Are you, or have you ever been a member of a Golf So f Yes, please state name of Society	Current Society Handicap:
Are you, or have you ever been a member of a Golf So f Yes, please state name of SocietyC Lowest Society Handicap:C Do you have any relatives who are members of Wicklo Proposer and Seconder Declaration:	Current Society Handicap:
Are you, or have you ever been a member of a Golf So f Yes, please state name of SocietyC Lowest Society Handicap:C Do you have any relatives who are members of Wicklo Proposer and Seconder Declaration: Applicants Name:	Current Society Handicap:

Email: info@wicklowgolfclub.ie - www.wicklowgolfclub.ie