



RUTLAND WATER GOLF COURSE

**I WISH TO APPLY FOR MEMBERSHIP AT RUTLAND WATER GOLF COURSE.
I AGREE TO ABIDE BY THE CLUB RULES IF MY APPLICATION IS ACCEPTED.**

Title..... First Name..... Surname.....

Address.....

Postcode E Mail

Tel. (Home) (Mobile)

Present or Previous Club Present or Previous Club Handicap

Occupation Date of Birth

7 or 5 Day Membership required

Signature

PLEASE ENCLOSE TWO PASSPORT PHOTOGRAPHS.

RUTLAND WATER GOLF COURSE RESERVES THE RIGHT TO DECLINE ANY APPLICATION.

MANTON ROAD, OAKHAM, RUTLAND, LE15 8HB
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