



Westmanstown Golf Club - Application for Membership

Membership Category Required _____

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

Family Name _____ First Name _____

Second Name or Initial _____ Date of Birth

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Address _____

Telephone Number

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Mobile Number

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Email address (please print in full) _____

Occupation _____ If Gárda, print your Reg. No. _____

Previous Club(s) _____

Reason(s) for lapsing _____

Handicap _____ GUI / ILGU Member Card No.

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If a transferee – State your Club _____ Existing Category _____

Membership category previously held _____ Date of Joining _____

Any further relevant information; _____

How did you hear about Westmanstown Golf Club? Please tick.

Word of Mouth

Road Signage

Newspaper Advert

Club Website

Other Website

Data Protection Legislation

It is necessary for Westmanstown Golf Club to collect and record certain personal data relating to each member, including the member's name, address, date of birth, telephone number, email address. The data provided by each member shall be provided to the GUI/ILGU and to other third parties to facilitate any services provided relating to the GUI/ILGU operating and maintaining the details of the handicap of members on the www.golfnet.ie system and for this purpose allocates each individual member of the Club a unique personal identifier number (Central Database Handicaps (CDH) Number). It is Westmanstown Golf Club that controls any data provided. The personal data will be used for management and administration purposes only. Any party receiving the information shall not use it for commercial purposes or release it to any party without prior approval.

The Club wishes to ensure that each of its members, for the purposes of applicable data protection legislation, explicitly consents to the processing of personal data by the Club in conjunction with its day to day business.

I consent, by ticking the boxes and signing below, to the following; (Please tick as appropriate)

To the Club/GUI/ILGU processing of my personal details as set out above and for such purposes as they consider reasonable and appropriate, including those activities detailed above.

To provide me with updates regarding Club activities such as competition, social events, promotions.

To provide me with details of Club fund raising activities including lotto and ticket sales.

I am aware that my photograph or video images may be taken whilst attending or participating in competitions or activities connected with the Club and I consent to them being used by the Club for items like a year book, event reports or on the Club website or social media channels.

I understand that I can withdraw my consent at any time by writing to the Honorary Secretary of the Club. I understand my rights under Data Protection legislation as set out on Westmanstown Golf Club Data Privacy Notice at www.westmanstowngolfclub.ie/privacy.html

I acknowledge my right to request in writing a copy of any personal data about myself which is held and have amended any personal data which is incorrect, incomplete or misleading.

If accepted as a member, I agree to observe all the rules and regulations of the Club for the duration of my membership.

Signed _____ Date _____

Print Name. _____

Proposed by:

Seconded by:

Name in Block Capitals _____

Name in Block Capitals _____

Signature _____

Signature _____

Mobile No.

Mobile No.

Note: Proposer and Seconder must be Ordinary Members or Seven Day Members

<p><u>For Official Use only</u></p> <p>Member approved by Club Joint Committee on</p> <p>Date _____</p> <p>GUI/ILGU Member Card No.</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>

<p><u>Notes</u></p>

Application Received	
Notice Board	
Interview	
Joint Committee	
Letter of Offer	
Acceptance	
Payment	