

# **Membership Form (b) - new members only to complete.**

Your Name: .....

Is Warkworth your only golf club?                      Yes/No (delete as appropriate)

If No, what is your other Club? .....

Which club will be your 'home' for handicap purposes? .....

Do you have a current handicap?                      Yes/No (delete as appropriate)

If Yes, what is your current handicap? .....

What is your 10 digit Central Handicap Database (CDH) number? (only applicable if you have a current handicap): .....

Please return this completed form with your membership form.

Alternatively you can complete the form and send a scanned version electronically to:

secretary@warkworthgolf.club

The form will be sent to the respective respective Ladies/Gents Match Secretary who will ensure your registration etc.

