



JUNIOR MEMBERSHIP NOMINATION

(Offered to Boys and Girls Aged 12 - 17)

APPLICANT

Name	
Address	
Date of Birth	

I hereby apply for Junior Membership of Lakeside Golf Club Camden, and if accepted I:

- ❖ agree to be bound by the conditions which apply to this membership category
- ❖ agree to behave appropriately at all times on Club premises & whilst representing the Club.
- ❖ understand that this membership entitles me to play in Junior competitions and in Member Competitions, after 11am, when there is not a Junior Competition available.
- ❖ understand at all times, when I play on Lakeside Golf Course, I must be accompanied by a player with a GA handicap (over the age of 18) or a person over the age of 18 years approved by the Golf Advisory Committee..

Have you ever been suspended from any club? Yes No

(if 'yes' please provide details). _____

Applicants Signature _____ **Date** ____ / ____ / ____

PROPOSED BY JUNIOR DEVELOPMENT OFFICER OR GAC MEMBER

Name	Signature

PARENT/GUARDIAN DETAILS

Name	
Home Phone	
Mobile Number	
e-mail address	

As the parent of the above named, and if accepted,

- ❖ I agree to the terms set out for Junior Membership.
- ❖ I realise that golf, as with all sports, has some degree of danger for participants.
- ❖ I agree to pay the applicable fee for Junior Membership.

I would be / would not be available to supervise during some Junior Competitions.
(cross out the one which is non-applicable)

Parent's/Guardian's Signature _____ **Date** ____ / ____ / ____

❖ Refer Cadet and Junior Membership Policy Attached.