



Farnfield Country Club

Application Form

MEMBERSHIP APPLICATION FORM

Title* Mr/Mrs/Miss/Ms

Firstnames

Surname

Address Line 1

Address Line 2

Address Line 3

Postcode

Date of Birth/...../.....

Telephone No

Mob No

Email

Details of membership requirements

Level of membership Golf Club/Horse Club/Both*

Method of payment Cash/Direct Debit/Cheque made payable to Farnfield Country Club*

Front Cover

If paying by Direct Debt please fill in the boxes below

Name of bank/building society	<input type="text"/>
Sort Code	<input type="text"/>
Account Number	<input type="text"/>
Amount to be debited	£ <input type="text"/> on the <input type="text"/> of every month
Name of account holder	<input type="text"/>

Please return this completed form to:

Justin Time
Farnfield Country Club
Horse Lane
Farnfield
FS13 4RT

For more information :

Tel No 029398 384745

Or

E Mail FCC@horse.co.uk

* Delete as appropriate