

Malling Area Golf Society - Membership Form

To: The Committee.

Please enrol me/ renew my membership as a Full/ Family member of the Malling Area Golf Society and as a member, I agree to be bound by the rules etc. of the society and I note and have due regard for the footnote regarding insurance etc and understand that the contents absolve the committee and or any organising member for any liability whatsoever on any golf day.

Please PRINT...

Last Name: First Name:

Address:

.....

Town: Postcode:

Phone No: Mobile No:

Email:

Home Golf Club: Handicap:

By signing you agree to abide by the rules and conditions of membership, including the insurance and liabilities of which brief details are shown on this form and I confirm that I absolve MAGS or any organising member for any liability whatsoever that may arise except through an accident immediately caused by that member during play.

I also agree for my name and contact telephone number(s) to be placed on the private membership area of the MAGS website.

The Committee of MAGS has taken out a Public Liability Insurance for all members, covering you on any golf course in Europe whilst remaining a MAGS member. They also recommend that any guest you may introduce to the society also have valid insurance in force and it is a condition of allowing any guest to play on a golf day that the introducing member has fully advised them of this recommendation and they in turn absolve MAGS for any liability that may arise during and on the golf day.

New members 'Full year': £35 (April onwards)

Cheques made out to

New members 'Part year': £25 (September onwards)

"Malling Area Golf Society"

Returning members: £20 Single / £30 Family

I enclose my payment of £ being the subscription for the year / part year, inclusive of Insurance (Public Liability).

Please note: A Signature acknowledges that you fully understand the conditions of membership and agree to abide by them, including the terms & conditions also shown on this form.

Signed Dated

Completed form and cheque payment to:

Alternatively, hand the completed form into Dave on the day and pay via card or BACS.

Dave Verga
19 Chippendayle Drive
Harrietsham
Kent
ME17 1AD

Acc. 91445782
S/C 40-31-06