POWERSCOURT
GOLF CLUB

JUNIOR ASSOCIATE MEMBERSHIP (J)

All sections of this application form must be completed in block capitals

First Name(s)	
Surname	
Title (Mr/Mrs/Miss/Ms/Other)	Date of Birth: (Must be 11-18) / /
Home Address	
Email Address	
Mobile Telephone No.	

Please tick the box if you wish to be contacted through junior member details above ☐

Parents Details

First Name(s)	
Surname	
Mobile Telephone No.	
Home Telephone No.	
Email Address	

Please tick the box if you wish to be contacted through parent details above ☐

Please advise if you do not give permission for photos of your child to be used for club use on social media/website ☐

For Office Use:

Category	
New GUI / ILGU No.	0 3 2

Golf Club/Handicap history details: Must be completed by all applicants

Are you currently a member of another club? YES ☐ NO ☐

If YES give details

Club _____

GUI/ILGU Number _____

Where do you wish to maintain your handicap – "Home Club"

☐ **Powerscourt**

☐ **Your existing home club as above**

Important Note
If you wish to transfer your handicap to Powerscourt from your existing club you must supply a signed up to date handicap certificate with this application from the club and notify them of the changes.

Have you been a member of a golf club in the past? YES ☐ NO ☐

If YES please give details and relevant handicap history and GUI/ILGU numbers

Junior Associate Members shall not play without written permission of the Captain of the Men's or Ladies Club, play for any other golf club in a GUI/ILGU recognised competition.

Signed **Junior:** _____ **Parent:** _____

Date _____