

North Eastern District Veteran Golfers Association

APPLICATION FOR MEMBERSHIP

Surname:	Given names:		
Address:		Postcode	
Phone No:	Email:		
Date of birth:	/ /	I am over 55 years of age	
I am a member of:	(Golf Club. H/cap:	
Golflink Number:			
		astern District Veteran Golfers	
Signature:			