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| STAGS Membership Application |
| Applicant Information |
| Name: |
| Date of Birth: | Home Phone: | Mobile Phone: |
| Current Address: |
| Town: | County: | Postal Code: |
| Email: |  |
| Golf Handicap: |  |
| Sponsors |
| Proposer: |
| Seconder: |
| Your sponsors will be contacted to validate this application.Please ensure you have notified them prior to your application. |
| Application Process and Fees |
| Please see the attached document “*Membership Application Process”* available via <http://www.stagsgolf.org.uk/Membership/membership.html> which explains how your application will be taken forward.On approval of your application by the STAGS Committee you will be requested to pay your Annual Membership fee plus an amount dependant on the number of Society Days remaining in that year.The Annual Membership fee is £25 plus £5 deposit for each remaining Society Day. You will be advised how much to pay once your application is confirmed. Any unused deposits will be carried over to the following year for your benefit.In subsequent years you will be required to pay your Annual Membership fee and Society Day deposits by a date notified by the Treasurer (but generally by end December each year). Payments can be made by electronic transfer to account details set out below. For other payment methods please contact the Treasurer for guidance.Bank AccountAccount Name: **Senior Touring Amateur Golf Society**, Sort Code: **40-02-40**, Account No: **51358200**TreasurerGeoff Roberts (geoffrob155@gmail.com – mobile phone: 07885 786008)These charges may change at the STAGS AGM, or other occasion as seen fit by the STAGS Committee following a vote by members.  |
| Signature |
| Electronic submission of this form by an applicant is acceptable and is deemed signed if this method is employed.On acceptance of this application you are agreeing to abide by the rules of the Seniors Touring Amateur Golf Society (STAGS) and its Executive Officers. Please see [www.stagsgolf.org.uk/](http://www.stagsgolf.org.uk/) for more information. |
| Signature of Applicant: | Date: |
| Submission of Form |
| Please return this form to the **STAGS Membership Secretary, Neil McElhoney**by post to: **5 Osprey Close, London, E11 1SY**or by email to: **nmcelhoney@yahoo.com** |