

Application for Membership

Forename(s) _____
Surname _____
Address _____

_____ Postcode _____

Telephone Numbers:

Home: _____ Main Contact Number Y/N

Office: _____ Main Contact Number Y/N

Mobile: _____ Main Contact Number Y/N

e-mail _____

Home Club _____

Other Club(s) _____

Handicap _____ (Exact)

Golf Team _____ (Years Played)

Left School _____ (Year)

Signed _____ Date _____

Please return completed form to:

Ian R. Sinclair
Hon. Secretary
Old Lorettonian Golfing Society
37 Gilsland Grange
North Berwick
East Lothian, EH39 5HZ

Tel: 01620 894407 or 07856 725147

Email: ian.r.sinclair@btinternet.com

Please enclose the following:

- Remittance for £30 for first year subscription (**required**)
- Remittance for £25 if you would like to purchase an OLGs tie(**optional**)

BANKERS ORDER FOR SUBSCRIPTION

To: The Manager

_____ (Name of Bank)

Bank Address

_____ Postcode _____

Please pay to the order of **The Old Lorettonian Golfing Society**

Bank: Lloyds TSB

Branch Name: Hanover Street, Edinburgh EH2 2DS

Account No: 00941258

Code: 30-25-81

Reference*:

**Please use a suitable reference (i.e. your name) to allow your payment to be reconciled.*

The sum of **£30** on the first working/banking day in each year commencing on 1st January 2017

This Bankers Order cancels and supersedes all previous Orders in favour of **The Old Lorettonian Golfing Society**.

Please debit:

Account _____

Sort Code _____

Name _____ (Block Capitals)

Signature _____

Date _____

Please complete and sign this Bankers Order and return it to you branch for processing.