



PITREAVIE (DUNFERMLINE) GOLF CLUB

QUEENSFERRY ROAD DUNFERMLINE KY11 8PR

Tel: 01383 722591

Fax: 01383 722592

APPLICATION FOR SOCIAL MEMBERSHIP

Mr / Mrs / Ms / Miss (Select one)

Name
(BLOCK LETTERS)

Address
.....

Post Code Telephone

Date of Birth / / Mobile

Email

I hereby apply for membership of Pitreavie (Dunfermline) Golf Club and will abide by the rules and regulations of the Club and those laid down by Council. I confirm I am aged 18 years or over.

Signature Date / /

NOMINATED BY MEMBERSHIP NO
(BLOCK LETTERS)

SECONDED BY MEMBERSHIP NO
(BLOCK LETTERS)

1 Both the nominator and the seconder must be Members aged 18 years or over

2 The application fee is £10.00 Enclosed : Received: / / Number :