

**MULLINGAR GOLF CLUB**  
**APPLICATION FOR JUNIOR MEMBERSHIP (8 – 17)**

Ref:

Passport Photograph

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_

Name of Parent/Guardian (1) : \_\_\_\_\_ Name of Parent/Guardian (2) : \_\_\_\_\_

Mobile Phone (1) : \_\_\_\_\_ Mobile Phone (2) : \_\_\_\_\_

Email Address (1) : \_\_\_\_\_

Email Address (2) : \_\_\_\_\_

School/ College: \_\_\_\_\_

Present Golf Club and Handicap (if applicable): \_\_\_\_\_

**Club History**

Please let us know if you have any of the following relationships to Mullingar Golf Club: (Please Tick)

- Sibling
- Parent
- Grandparent
- Other

Please provide name or description:

\_\_\_\_\_  
\_\_\_\_\_

The Proposer and Secunder must be **Full** Members of Mullingar Golf Club.

**A member of the Committee of Management, the Men's Committee or the Ladies' Committee may not propose or second a candidate.**

**Name of Proposer: (Print)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Proposer:** \_\_\_\_\_

**Name of Secunder: (Print)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Secunder:** \_\_\_\_\_

**Note:** A Junior Member shall be a boy or girl between 8 and 17 years of age on the 1<sup>st</sup> January 2026. Junior Members will be on probation from the date of acceptance until the age of 18.

Mullingar Golf Club will adhere to "Code of Ethics for Golf for Young People". You can download a copy of this on the Mullingar Golf Club website in the junior section. Juniors may **not** introduce guests to the Club.

**DECLARATION TO BE SIGNED BY APPLICANT**

I agree to be bound by rules as set out for junior golfers by the Management Committee of Mullingar Golf Club.

Signature of Junior Applicant: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

The safety and welfare of junior members, when in our care, is paramount, and it is therefore important that we are aware of any illness, medical condition and other relevant health details so that their best interests are addressed.

<b>MEDICAL INFORMATION</b>	
Child's Doctor's Name: (Optional) _____	Surgery Address: (Optional) _____
Surgery Telephone Number (Optional) _____	
Medical History Information _____ _____	

Please include all medical details that might be relevant in dealing with your child in a safe manner, such as allergies, medication, special requirements etc.

**Parental / Guardian Consent**

- a. I consent to the above child participating in golf activities at Mullingar Golf Club in line with the Club's Code of Ethics for Golf for Young People and the Club's Regulations for junior members.
- b. I will inform the club of any changes to the information provided above. I confirm that all the details are correct, and I am able to give parental consent for my child to participate in and travel to all activities.
- c. I understand that photographs will be taken during or at golf related events and may be used in the promotion of golf. By agreeing to your images being used, you agree to assign any copyright or any other right of ownership of these images to the Club.
- d. I acknowledge that the club is not responsible for providing adult supervision for my child except at formal events and junior golf coaching, matches or competitions.
- e. Overnight Away Trips – If selected for representative teams, I confirm I am happy with the travel and accommodation arrangements the Golf Club may arrange for my child.
- f. The club has a Data Privacy Policy which can be found in the Club Document folder of our Club V1 membership app. Your data will be stored and used in accordance with this policy.

The club will consider a number of factors when allocating places, including family connections to the club. Places will also be made available to other applicants where space allows.

All applications for Junior Membership are subject to approval by Committee of Management, which reserves the right to accept or decline applications at its discretion.

**This form must be fully completed and returned to the Club Office. Incomplete applications will not be accepted.**

Signature (Parent/Guardian): \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_