



HIGH LODGE GOLF CLUB MEMBERSHIP FORM 2012

Please tick which membership you would like to join: 7 - day 5 – day Junior
(Age identification may be asked)

Title: _____ First Name: _____ Surname: _____

House Name/Number: _____ Road/Street: _____

Town: _____ County: _____ Post Code: _____

Home Telephone: _____ Mobile: _____ Email address: _____

Please enclose a stamped address envelope if you would like your membership card sent to you or it will be at reception for you to collect. Please allow 7 days for card process during which subscriptions are not honoured. New Subscriptions will start from the date of card process.

If you would like to receive further information from High Lodge please circle the areas of interest below.

Shooting – Golf – Fishing – Retail Shop – Functions – Hospitality – Traps – Accommodation

Signature:.....Print Name..... Dated: __/__/__

Please note: All information supplied is considered to be strictly confidential and will be securely held in our password protected customer database. No information will be passed to a third party without your express permission. High Lodge will only contact you about our occasional special offers if you have given us your express permission, as indicated above.

Cash/Cheque

Cheques payable to: **High Lodge Leisure Limited**



Send to: Sarah Caplin
High Lodge Shooting School Leisure Limited
Haw Wood
Hinton
Saxmundham, Suffolk. IP17 3QT

www.highlodge.co.uk

email: sarah@highlodge.co.uk