



NOIDA GOLF COURSE SOCIETY

APPLICATION FORM FOR TRANSFER OF REGULAR MEMBERSHIP (To be filled up by the proposed transferee)

1. (a) l	Name		
	(Block Letters)		
(b)	Father's/Husband's Name		
(c)	c) Date of Birth (d) Nationality		
2.	PROFESSION OR OCCUPATION		
(a)	Govt. Service/Business/Public	Sector/Private Sector	
(b)	Designation		
(c)	Office Address		
(d) 3.	Telephone No		
	Present Residential Address		
4.			
5.	Names of Clubs of which the applicant is a member		
6.	Last University, College or School attended with year		
7.	Married or Single		
8.	I have/have not previously applied for membership of the Noida Golf Course _		
9.			
	(if yes, Registration No.) Whether Golfer / Non-Golfer		
10.	My Handicap is		
	•	O BE GIVEN BY THE MEMBER INTERESTED TO S REGULAR MEMBERSHIP OF NOIDA GOLF COURSE)	
1.	Name of Member:		
2.	Membership No:		
3.	Date of Membership:		
4.	Amount of Entrance fee paid:		
5.	Amount of Security Deposit paid:		
6.	Outstanding Dues (if any):		
7.	Name and Address of the person to whom membership is to be transferred : (a)Name:		
	(b)Address:		
Signature of the Member Date:		(Signature of the APPLICANT (Transferee) Date:	
Address:		Address :	
Phone No		Phone No	
Residence:		Residence :	
Office:		Office:	