

Golf Club Ypsilon, z.s.
Ke Klubu 17
463 31 Mníšek
IČ: 26650002

REGISTRATION FORM

Member of Golf Clubu Ypsilon, z.s.

Year of membership: : _____

First Name: _____ Last Name: _____ Title: _____

Date of Birth: _____

HCP : _____

Day of HCP Exam, Place, Trainer (only for new, newly registered players in CGF)

ID number:

(in case if you have an another registration number in Czech golf federation)

Full place of residence: _____

Phone: _____ Email address: _____

Types of membership:

- Annual membership
- Ten years of membership
- Lifelong membership
- Student membership

Not applicable cross out

I agree with the conditions, which I become member of Golf Clubu Ypsilon, z.s and approved by the applicable statutes and declare that I have been acquainted with the rights and obligations of members I agree that the Golf Club Ypsilon, z.s. entitled to process and record my personal information into a central repository of the Czech Golf Federation and a private club membership records.

Signature of member: _____ (lawful representative member until 18 years)

The Golf Club Ypsilon, z.s.: _____
(2 Representatives of administrative councils)

Member describe to the register ČGF date: _____

Registration number: _____

Membership paid by the day: _____

Form of payment: _____

Note: