



**Bakewell Golf Club  
Station Road  
Bakewell  
DE45 1GB**

**Membership Application Form**

Type of Membership: (Full, 22-35, 18-21 or Junior etc)	
Name: (Add parents name if <18 years)	
Address:	
Post Code:	
Email address: (Use parental email if <18 years)	
(Mobile) telephone: (Use parental number if <18 years)	
Age & Date of Birth:	
Previously a member at: (If applicable)	
CDH / England Golf number: (If previously a member of England Golf)	

Please return the completed form to the Membership Secretary, by email if possible.  
e-mail: [membership@bakewellgolfclub.co.uk](mailto:membership@bakewellgolfclub.co.uk)

For any further information or assistance please email the Membership Secretary