



LUTTRELLSTOWN CASTLE
RESORT

Luttrellstown Castle Resort Golf Club
Nomination Form for Junior Membership
Candidate Details

Membership Type		
Name of Candidate		
Home Address		
Phone Number		
Gender		
Date of Birth		Email:

Medical/Behavioural Information

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

Date of last Tetanus Injection		
Doctor's Name		
Doctor's Address		
Doctor's Phone Number		

Parent/Guardian Information

Name of Legal Guardian/Parent/Grandparent		
Relationship to Candidate		
Address (if different to Candidate)		
Contact Details for Parent/Legal Guardian	Mobile Number:	Email:

Handicap Details

Does the candidate have an official GI handicap	(Yes/No)		(Handicap)	
Which golf club administers the handicap				
What is the candidates 8-digit GI handicap number for this club				
Which club does the candidate want to administer their handicap				
Other clubs of which the candidate is a member				
Playing History				

Parent/Guardian Signature

I hereby apply for membership of Luttrellstown Castle Golf and Country Club and Luttrellstown Castle Golf Club on behalf of my child and agree that both my child and I will be bound by the rules, Bye-Laws, and terms and conditions of the Club. (2)

I hereby consent on behalf of my child to the sharing of their personal details (name, address, phone number, email, date of birth, gender, emergency contact) with Golf Ireland for the purposes of handicap administration and utilising the World Handicap System. (2)

I acknowledge that by opting for my child to be allocated a Handicap Index, their golf scores and Handicap Index will be visible to other members of the club via MyGolf, Golf Ireland App, MasterScoreBoard, the Luttrellstown Members Website and other technology platforms, for the purposes of publishing competition results and peer review. (2)

I understand that members of the Junior Committee are volunteers, and I am willing to assist the Junior Committee if required, subject to my availability

Signature:

Date:

- (1) *Junior membership is only available to children, grandchildren, or legal guardians of ordinary members.*
- (2) *Where a grandparent is the ordinary member, the candidate's parent or legal guardian must complete this section.*

Nominations

In our opinion the above-named candidate is suitable for membership, and we are pleased to support his/her application.

Name of Proposer (Print Name)		
Number of years Proposer has known the candidate		
Proposer Signature	Signature:	Date:
Name of Seconder (Print Name)		
Number of years Seconder has known the candidate		
Seconder Signature	Signature:	Date:
NOTE: THE PROPOSER AND SECONDER SHOULD BE ORDINARY MEMBERS		
Authorised Company Signature:	Signature:	Date:
ALL SELECTIONS MUST BE COMPLETED AND AUTHORISED BY THE COMPANY BEFORE MEMBERSHIP CAN BE APPROVED		

Procedures for providing certified playing handicap for competition purposes for the men's club at Luttrellstown GC.

If you have a playing handicap with a registered golf club then in order to compete in the Luttrellstown men's club competitions you must provide our handicap secretary Sean McDermott (luttrellstownhandicap1@gmail.com) with a copy of your handicap certificate. This can easily be obtained from your club secretary.

If you do not have a registered handicap provided by GI then you must follow the below procedures:

- 1) You must provide three 18 hole completed scorecards to the handicap secretary Sean McDermott.
- 2) These cards must be from the course at Luttrellstown Golf Club.
- 3) These cards must be signed by a registered member of Luttrellstown Golf Club who holds a current playing handicap.
- 4) Failure to provide these cards or a current handicap certificate will prohibit you from entering all competitions run by the men's club.
- 5) Completed cards should be marked "for handicap" and placed in the box for cards beside the log in computer.

SIGNED by Parent/Guardian:

SIGNED by Candidate: