Issue 2/20 Approved: PRS QR251d

HEACHAM MANOR GOLF CLUB TRIAL MEMBERSHIP APPLICATION FORM 2026

Title: Surname: Forename:		
Address:		
Town: County:		
Postcode: Tel No		
Mob Tel No: E-Mail Address:		
Date of Birth:/ Handicap:	No Handicap	(Please see rule 12)
I am a member of another golf club: Name of CDH Number:		
I would like to make Heacham Manor my home club for handicapping purposes:		
I have previously held membership at the following clubs golf clubs: No Previous Clubs: Name of Clubs:		
I have previously held a handicap of:		
How did you hear about Membership at Heachan		
If introduced by member, please include membe		
I am happy to receive email correspondence from Heacham Manor Golf Club. Please Tick []		
I am happy to receive email correspondence about other Searles Leisure Group products Please Tick []		
I am happy for Searles Leisure Group to share my email and date of birth to England Golf Please Tick []		
Any personal data you give to us will be processed in our website https://www.heacham-manor.co.uk/ourp		ur privacy policy located on
I hereby apply for membership to Heacham Mand stated in the current Rules and agree to abide by		e terms and conditions
Signed:	Date:	
MEMBERSHIP CATEGORY	COST	TOTAL
New Year Trial Membership	£149.00	
1st January 2026 until 30th April 2026	includes Affiliation	
This 'Trial membership' entitles the above to me April; at that time the option to join in full is ava The annual membership fee will be automatically membership reduced by £123 (membership paid new season. £149 Offer rate available please return the completed form with	ilable. I invoiced in April and will be a minus affiliation). Affiliation of the color of the c	e the standard n will be required for only.
Please return the completed form with	i payment to, meatham	manor Gon Shop.
OFFICE USE ONLY		

HM BRS SUBS BILLS EMAIL CARD WHS EPOS

BRS PIN.....