



**Little Sai Wan Golfing Society**  
Founded 1964

**Membership Application Form**

Please complete all information below in **CAPITAL LETTERS** and forward to:

Vance Lee, Membership Secretary – membership@lswgs.com

I wish to become a member of Little Sai Wan Golfing Society (LSWGS). I confirm that all information provided below is both true and accurate. I further confirm that in the event my application is successful I hereby agree to be bound by the Rules of the Society.

FULL NAME :

ADDRESS :

MOBILE PHONE :

EMAIL ADDRESS :

The following are memberships/handicaps I hold with other clubs/societies:

<b>CLUB/SOCIETY</b>	<b>LOCATION</b>	<b>MEMBERSHIP NUMBER</b>	<b>HANDICAP INDEX</b>	<b>DATE</b>
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Membership of the HKGA is mandatory for LSWGS membership.

HKGA number: \_\_\_\_\_

Handicap index \_\_\_\_\_

**All applicants are required to play two rounds with two different LSWGS committee members before submitting their application. Please list the details of those games below.**

Name of LSWGS committee member and date: \_\_\_\_\_ Date

Name of LSWGS committee member and date: \_\_\_\_\_ Date

Signature of proposer: \_\_\_\_\_ Date

Signature of seconder: \_\_\_\_\_ Date

SIGNATURE OF APPLICANT \_\_\_\_\_ Date