

Golf Club Application

Springfield Golf Club
123 Fairway Drive
Springfield, IL 62704
(555) 987-6543
membership@springfieldgolfclub.com

Date: January 15, 2025

To,
Membership Committee
Springfield Golf Club
123 Fairway Drive
Springfield, IL 62704

Subject: Application for Membership

Dear Membership Committee,

I am writing to apply for membership at Springfield Golf Club. As an enthusiastic golfer, I am drawn to the club's renowned facilities and the sense of camaraderie among its members. I am eager to participate in tournaments, utilize the training facilities, and engage in the club's social events.

Personal Details:

- Full Name: Elizabeth Carter
- Address: 456 Pine Avenue, Springfield, IL 62704
- Contact Number: (555) 321-7654
- Email Address: elizabeth.carter@email.com
- Profession/Occupation: Architect
- Date of Birth: April 15, 1987

Reason for Joining:

I am particularly interested in the opportunity to refine my golfing skills on the club's well-maintained course and participate in seasonal tournaments. Additionally, the

networking opportunities and social events offered by Springfield Golf Club align with my personal and professional interests.

References (if required):

Mr. John Smith and Mrs. Rebecca Taylor, both long-standing members of Springfield Golf Club, have kindly agreed to support my application.

I have attached the completed membership form, a copy of my identification, and the required documents for your review. I look forward to contributing to the vibrant golfing community at Springfield Golf Club.

Thank you for considering my application.

Sincerely,

Elizabeth Carter

[Signature, if submitting a hard copy]