

Golf Club Lyon 38280 VILLETTE D'ANTHON Phone : 04 78 31 11 33 www.golfclubdelyon.com

City :

REGISTRATION REQUEST

Mobile phone :

SURNAME : NAME :

Address :

Photo

Zip code :

Home phone :

E-mail address :

Date of birth :

Nationality : Family situation :

Number of children :

Name and date of birth of children :

If c	hildren	play	golf,	index	;

PROFESSIONAL INFORMATION

Line of business :	Position :	
Name of the company :		
Address :		
Phone:	E-mail :	

Specific comments :

GOLF HISTORY

-----Golf practice since :

Current index :

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Previous clubs (name and	year of re	gistratio	n):		
Took part in teams in prev	vious clubs	:	yes O	No	0
HOW DID YOU HEAR ABOU	<u>T THE LYO</u>	N GOLF CL	UB?		
WHAT IMAGE DO YOU HAV	e of the l	YON GOL	CLUB ?		
WHAT ARE YOUR EXPECTAT	TIONS WHE	EN REGIST	ERING ?		
SPONSORSHIP					
<u>First sponsor</u>					
<u>Mrs, Mr</u> :					
Second sponsor					
<u>Mrs, Mr :</u>					
<u>As a member, do you auth</u> communicate on the life o				ormation so o No	as to O
<u>Do you accept to have you</u> <u>the Internet website, the</u> <u>O</u> Yes O No	e directory	•	<u>e Lyon Golf Club con</u>	nmunication r	<u>naterial, such as</u>
INFORMATION FOR TH	HE CLUB				
Date of admission reques	t :				
Full time player 🔿		<u>Week</u>	player 🔿		
Lyon Golf Course Licence	○ Yes		$^{ m O}$ No		
Spouse registered	$^{\circ}$ yes	⊖ No	<u>Children registere</u>	<u>:d</u> ∶ ∪ Yes	O No
<u>Golf school</u> :	○ Yes	$^{\rm O}$ No			
Locker number :			<u>Electric golf car</u>	<u>t</u> : ^O Yes	O N₀
Member login on the Lyon					
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