MEMBERSHIP DECLARATION FAMILY
MODRY LAS GOLF CLUB 2022

Submission date:...../...../20....

Surname……First name.....

Street & House Number……

City……Postcode.....Country…….....

Date of birth.....Handicap.....

Tel no.....Email…….....

Spouse

Surname……First name.....

Street & House Number……

City……Postcode.....Country…….....

Date of birth.....Handicap.....

Tel no.....Email…….....

Child (0-18 yrs.)

Surname……First name.....

Date of birth.....Handicap.....

Child (0-18 yrs)

Surname……First name.....

Date of birth.....Handicap.....

„MODRY LAS" S.A.
ul. Mickiewicza 20, 73-200 Choszczno
tel. + 48 667 710 410 golf@modrylas.pl www.modrylas.pl
NIP 594-14-79-954 REGON 812370056 KRS 0000019616

Gary Player DESIGN

Membership category:

(For details, please see the pricing and detailed terms and conditions)

- **FAMILY** ….

Payment details:

Bank/Transfer ….

Club reception / Cash ….

Club reception/ ….

Amount paid: …..... Paid on day: …....

Bank transfer details:

Modry Las S.A.
Gospodarczy Bank Spółdzielczy w Choszcznie
IBAN PL 66 8359 0005 0039 6666 2004 0001
SWIFT / BIC GBWCPLPP

Additional terms and conditions :

The annual fee will be determined every year by the Board of Modry Las SA. Modry Las SA reserves the right to change the terms and conditions of the Club Membership at any time and without warning.

I agree to receive information from Modry Las by e-mail, telephone or letter about all the events related to the Modry Las Golf Club.

I hereby declare that I have read and I accept the above conditions and the regulations of Modry Las Golf Club.

…..... …....

Modry Las SA rep. signature Member's signature

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