Disabled and Inclusive Golf Association (DIGA)
Application for Junior (16-18) Membership

2026 Membership Fee - €25/£22

Please complete in Block Capitals - to be completed by Parent/Guardian

Junior Personal Details

First Name

Surname

Date of Birth

Address

Age at time of application

Eircode / Postcode

Parent / Guardian Contact Details

First Name

Surname

Relationship to applicant

Email

Contact Number (please inc country code, eg + 00 353)

Current Golf Details of Applicant

Home Golf Club (if any)

World Handicap Index (if any)

Golf Ireland Number (if any)

Further Information

Is there any information you would like to share with us to make your DIGA experience more enjoyable?

Declaration

From time to time, we would like to make contact with details of competitions and information about events. Contact will be made to the Parent/Guardian completing this application. If you consent to us making contact for these purposes, please tick how contact can be made below.

Text (SMS) **Email** **WhatsApp - Group chat for DIGA Members** ✔

Signing below will confirm you accept the terms of the following (Click here to access the policies):
DIGA Data Privacy Policy || DIGA Membership Rules and Benefits Policy || DIGA Dignity and Respect Policy

Signature of applicant **Date**

Signature of parent / guardian **Date**

Applications will be reviewed by DIGA officials. Approved applicants will be contacted with details on how to transfer the membership fee to DIGA. Membership will not be active until the fee is received. No cash will be accepted.

For DIGA Committee only

Date Form Received	
Date of Review	
Membership Passed	
Date payment details provided	
Date Payment Received	
Membership No	
Signed on behalf of DIGA Committee	
Date	