



APPLICATION FOR MEMBERSHIP

Name: _____

Address: _____

City: _____

State, Zip: _____

Phone: _____

Email: _____

Occupation: _____

Employer: _____

BOARD OF DIRECTORS APPROVAL

Tournaments Played by Applicant

_____ Score _____

_____ Score _____

_____ Score _____

Beginning Handicap: _____

Approval: Yes / No

Date: _____

Vice-President Signature

Sponsor Name: _____

Do you know any other members in this club? If so, who?

How long have you been playing golf?

How many time do you play per month?

Do you have an official handicap? Yes / No

If so, what is your GHIN number?

How many monthly tournaments do you expect to play per year?

Would you be willing to serve on a club committee? Yes / No

I understand and agree that my application does not guarantee my membership. I further understand that I must play in three scheduled tournaments in a consecutive four-month period, and if I cannot meet this requirement my application may be terminated. I may, however, reapply at a later date. I also understand that the Board of Directors does not as a matter of policy provide any reason or explanation for its denial of any application.

Signature

Date

Sponsor's Statement

I wish to sponsor the above applicant for membership. I believe he is of sterling character, will be an asset to our club, and will make meaningful contributions.

Member Signature

Date