



2018 MEMBERSHIP APPLICATION

Name: _____

Street: _____

City, State, Zip Code _____

Phone # _____

Email address: _____

Individual Memberships	Amount Included
_____ Young Junior	\$ _____
_____ Junior	\$ _____
_____ Single Adult	\$ _____
_____ Senior	\$ _____
_____ Senior Weekdays	\$ _____
_____ Cart Punch Pass	\$ _____
_____ Range Membership	\$ _____
Married Couples	
_____ Regular Married	\$ _____
_____ Senior Married	\$ _____
_____ Senior Married Weekdays	\$ _____
_____ Cart Punch Pass	\$ _____
_____ Family Membership	\$ _____
TOTAL ENCLOSED	\$ _____

I am interested in the following leagues:

Jr. Golf Leagues (Mon. AM)	_____	Tuesday PM Mens	_____
		NEW: Thursday AM Mens League	
Monday PM Ladies	_____	Thursday PM Mens	_____
Wed. AM Ladies	_____	Sunday PM Couples Scramble & Potluck	_____
Wed. PM Ladies	_____	Friday PM 2-man scramble	_____