

# SENIOR AMATEUR GOLF AFFAIR

P.O. Box 2634, Helendale, CA 92342

Please fill out and mail with check or money order to above address

## APPLICATION FOR MEMBERSHIP

**NAME** \_\_\_\_\_  
FIRST NAME AND MIDDLE INITIAL      NICKNAME      LAST NAME

**ADDRESS** \_\_\_\_\_  
Street or Post Office Box      City      &      Zip Code      State

**Phone Number** (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Residence      Cell

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_      **Email** \_\_\_\_\_  
Month      Day      Year

**Spouse:** \_\_\_\_\_ **Birth Date** \_\_\_\_/\_\_\_\_ **Anniversary** \_\_\_\_/\_\_\_\_  
First Name      Month      Day      Month      Day

**Golf Club** \_\_\_\_\_ **Current Index** \_\_\_\_\_ **Low Index** \_\_\_\_\_

**SCGA/USGA ID#** \_\_\_\_\_ **Private Cart?** Yes \_\_\_\_ No \_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## ADVISORY COMMITTEE ACTION

The above application has been reviewed by the Advisory Committee:

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Approved ( ) Not Approved ( ) Deferred (\_\_\_\_)

Signed \_\_\_\_\_ Signed \_\_\_\_\_

Signed \_\_\_\_\_ Signed \_\_\_\_\_

Signed \_\_\_\_\_ Signed \_\_\_\_\_

Signed \_\_\_\_\_ Signed \_\_\_\_\_

**Comments:**

\_\_\_\_\_