

**GARDEN STATE WOMEN'S GOLF ASSOCIATION
MEMBERSHIP APPLICATION**

Date _____

Applicant's Name _____

Address _____

Telephone # _____ Current Handicap Index _____

Applicant's email _____

Applicant's cell phone # _____

Applicant's Spouses's name _____

Present Club Affiliation _____

Membership Number _____ GHIN Number _____

Previous Club Affiliation (s) _____

How long has her Index been 14.0 or less? _____

Has her Index ever been significantly lower? _____ If yes, how low? _____

Has the applicant ever been a golf professional? ____ If yes, when did she regain her amateur standing? _____

Is the applicant a member of any amateur organizations? (Please list.) _____

Does she play in Local, State and/or National events? _____

Has the applicant won any awards? _____

Is the applicant known by a current board member? _____

Is the applicant acquainted with other GSWGGA members? (Please list.) _____

How long have you known the applicant? _____

How often do you play golf with her? _____

Was play related to this application? _____

Sponsor/Club Name: _____

Co-sponsors & Club Names: _____
