



Membership Application

Pennsylvania Golf Association
301 Pennsylvania Ave
Kutztown, PA 19530
e-mail: jbarkley@pagolf.org
Web Site: <http://www.pagolf.org>

Club Information:

Club Name: _____

Address: _____

City: _____

Phone: _____

ZIP: _____

Fax: _____

E-mail: _____

Website: _____

Course Information:

Type of Facility: Private Public

Semi-Private Municipal

Club w/out Real Estate

Number of Holes: 9 18 27 36 Other _____

Number of Male Members: _____

Organization Controlling Facility: _____

Does Your Club use USGA GHIN Service for Handicapping?

Yes No

If Yes, What Association Do you Receive GHIN From?

Billing and Accounting Information:

Contact: _____

Phone:

Address: _____

Fax: _____

E-Mail: _____

City: _____

State: _____

ZIP: _____

Staff:

Golf Professional: _____ **Phone:** _____

E-Mail: _____

Club Manager: _____ **Phone:** _____

E-Mail: _____

Superintendent: _____ **Phone:** _____

E-Mail: _____

Club Officials:

President/ Owner: _____ **Phone:** _____

Secretary: _____ **Phone:** _____

Golf Chairman _____ **Phone:** _____

Greens Chairman: _____ **Phone:** _____

Hdcp Chairman: _____ **Phone:** _____

Authorized Signature: _____

DATE: _____