

**CGC 9 HOLE WOMEN'S ASSOCIATION
NEW MEMBER APPLICATION**

APPLICATION

Date: _____

NAME(please print)_____

PHONE #_____

ADDRESS (summer)_____

ADDRESS(winter)_____

E-MAIL_____

CGC Membership #_____ **Computer/Local Access (Handicap)#**_____

(must be 27 or lower)

Annual Dues: \$ 30.00

Optional Donation to

Nauset Girl's Golf Scholarship \$5.00

MAKE CHECK PAYBLE TO--- CGC 9-Holers

MAIL TO--- Sharon Marotti 508-896-6812

61 Paddock Way , Brewster, MA 02631

*******DO NOT PUT CHECKS IN PRO SHOP BOX*******

New Member Verification by Officer

Handicap Checked: _____ Paid League Fee _____

Attach Handicap Label Here.