

VALLEJO WOMEN'S GOLF CLUB

Blue Rock Springs Golf Course
655 Columbus Parkway
Vallejo, CA. 94591

Thursday Play Days – 8:30 am Starting Tee Times – West Course

NEW MEMBER APPLICATION

Date _____

Name (please print)

Significant Other

Street Address

City

Zip

(_____) _____
Home Phone

(_____) _____
Cell Phone

Email

Birthday (optional-month & day only)

GHIN # (if you have an established handicap)

Fees are due and payable upon acceptance of membership. *Fees for the Birdie Tree and Hole-in-One Fund are optional.* Annual membership renewal fee is due and payable no later than September 15th of each year.

Membership Fee	\$69 (includes one-time \$10 fee)
<i>Birdie Tree</i>	<u>4</u>
<i>Hole-in-One</i>	<u>4</u>
TOTAL	\$77

I hereby submit this application for membership in the Vallejo Women's Golf Club (VWGC) and agree to abide by the Rules and Regulations of said club.

Signature

Date approved _____