

2019 Greate Bay Women's Golf Association

Membership Renewal/Application

NAME _____

(Please Print)

___ **Please Check** My information in the 2018 Revised Membership Directory is up to date. ***No need to fill out information below.***

PLEASE UPDATE the following:

SUMMER ADDRESS _____

WINTER ADDRESS _____

CELL PHONE _____ PHONE _____

EMAIL _____

(Please print carefully)

___ I will play 18 holes

___ I will play 9 holes

2019 WEEKLY CHIP IN CONTEST

Weekly Chip in Contest participation is a seasonal event. Please sign up and pay ***with*** your membership. ***There will be NO weekly sign ups.***

Please sign me up! Can't wait for May!

___ Membership only \$75

___ Weekly Chip-In \$17

Total Enclosed: \$ _____ (\$92 for both)

Remit check to: **Greate Bay Women's Golf Association**

PLEASE MAIL TO:

Jane Davis
1365 Asbury Ave
Ocean City NJ 08226

Questions? Contact Jane at: janednj@yahoo.com (609)204-1302