

**EL DORADO WOMEN'S GOLF CLUB  
MEMBERSHIP APPLICATION**

FIRST NAME: \_\_\_\_\_ MI. \_\_\_\_\_

LAST NAME: \_\_\_\_\_ HUSBAND'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: (\_\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
Area Code

GHIN #: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

DUES: YEARLY DUES: \$40.00 \$ \_\_\_\_\_

HONORARY DUES: \$20.00 \$ \_\_\_\_\_

EDWGC HOME CLUB: \$25.00 \$ \_\_\_\_\_

NOT HOME CLUB: \$10.00 \$ \_\_\_\_\_

DAILY FEE: \$25.00 \$ \_\_\_\_\_

NEW MEMBER FEE: \$15.00 \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

**Make Check Payable to: EDWGC**

**Mail To: Barbara Collins  
3741 Primrose Street  
Seal Beach, CA 90740**

**Telephone: (562) 431-1850**

**Dues Delinquent After October 15<sup>th</sup>**

**Late Fee: \$10.00**

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**PLEASE COMPLETE THIS INFORMATION REQUIRED FOR HANDICAP INDEX:**

FULL NAME: \_\_\_\_\_ GHIN #: \_\_\_\_\_  
Last First MI.

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE #: (\_\_\_\_\_) \_\_\_\_\_  
Area Code

WILL EDWGC BE YOUR WPLGA HOME CLUB? \_\_\_\_\_  
YES NO

IF NO, ENTER YOUR WPLGA HOME CLUB: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_