NORTHEASTERN WOMEN'S GOLF ASSOCIATION
MEMBERSHIP CARD

Name _____
LAST FIRST

Address _____
STREET

_____
CITY STATE ZIP

Club _____

Home Telephone _____

Cell Phone No. _____

Date of Birth _____

GHIN No. _____

Handicap Index_____•_____

E-MAIL_____

Please check only 1
___ Membership Fee $50.00
___Honorary Playing Member $38.00
___Honorary Nonplaying Member 0