

Trail Ridge Men's Golf Club Membership Application

Name (Last, First):		DOB	
SCW Street Address:			
Phone:		Rec Card #:	
E-Mail Address:			
<input type="checkbox"/> Continuing Member		GHIN Member #:	
<input type="checkbox"/> New Member		<input type="checkbox"/> Transfer from _____	
<input type="checkbox"/> Non-Competitive Member		<input type="checkbox"/> Dual Membership _____	
		Confirmation # _____	
Dues	Renewal/New Prior to 12/15/21	Renewal/New After 12/15/21	Non- Competitive
Club Fee*	\$30.00	\$30.00	30.00
Handicap Fee**	<u>\$35.00</u>	<u>\$40.00</u>	
	\$65.00	\$70.00	
CHECKS ONLY payable to Trail Ridge Men's Golf Club			