MUROC LAKE GOLF COURSE GUEST PASS APPLICATION



Complete From and Mail To:

Muroc Lake Golf Course 111 Crest Drive, Bldg. 5611 Edwards, CA. 93524-0001

Print: (Mr., Mrs., or Ms.) First Name, Middle Name, Last Name Name of Employer: Driver's License Number / Issuing State / Issue Date / Expiration Date SSN: Date of Birth: Place of Birth: Citizenship: Hair Color / Eye Color / Weight / Height Home Address: City: _____ State: ____ Zip: ____ Telephone Numbers Cell: (_______ - _____ -Work: (_____-Fax: (______ - ____ -Email: _____

FOUO:

412 FSS/FSCG Golf Manager and 412 FSS/FSW Flight Chief

Printed Name: DON HUISJEN or BILLY HAMPTON