



**Ladies Inner Club
Membership Application**

Applicant's Name: _____ **Date of Birth:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: (Home) _____ **(Work)** _____ **(Cell)** _____

E-Mail Address: _____

GHIN # (If applicable) _____

Other Golf Club Affiliations (If applicable) _____

Member Reference (If applicable) _____

Membership: \$100.00

Must be paid by: July 6, 2020

Please make checks payable to: Triggs Ladies Inner Club

Mail to: Sandra Harper, 60 Campbell Circle, East Greenwich, RI 02818