

**THE CAPTAINS GOLF COURSE
9 HOLE WOMEN'S ASSOCIATION
NEW MEMBER APPLICATION**

DATE: _____

NAME (please print) _____

PHONE # _____

ADDRESS (primary) _____

ADDRESS (summer, if different) _____

E-MAIL _____

Your handicap for 9 holes must be 27 or lower

CGC Membership # _____ **Computer/Local Access (Handicap)#** _____

Annual Dues: \$ 35.00 _____

Optional \$5 Donation to Nauset Girls' Golf Scholarship Fund _____

Total _____

MAKE CHECK PAYABLE TO: CGC 9-Holers

MAIL TO Donna Potts, PO Box 1910, Brewster, MA 02631

Phone: 508-896-9325

Email: donnapot@me.com

*******DO NOT PUT CHECKS IN PRO SHOP BOX*******

New Member Verification by Officer

Handicap Checked: _____

Paid League Fee _____