



Membership Application

www.trianglewomeningolf.org

To be completed by New and Renewing members – Please print

Personal Information

Name _____
First Last Nickname

Email Address _____
Primary Alternate

Telephone Contact _____
Primary Alternate

Home Address _____
Street City/State Zip

Emergency Contact Info _____
Name Relation Telephone No.

Birth Date ____ / ____
Mo Day
Shirt Size: ____ Small ____ Med ____ Lg. ____ X-Lg. ____

Golf Information

Golf Skill Level: ____ New Golfer ____ Intermediate ____ Advanced

Do you have a USGA Handicap Index? ____ Index ID # _____

Average score: ____ 18-Holes ____ 9-Holes ____ Not keeping score

Dues Information – Membership Use

____ Initial new member application fee & dues \$145.00 (\$45 + 100) Paid ____
____ TWIG Dues – Renewing membership \$100.00 Paid ____
Year joined – Member since date ____ / ____ Membership ____ Treasurer ____
Mo Year

Please make check payable to **TRIANGLE WOMEN IN GOLF**. Mail check and completed application to
T.W.I.G. MEMBERSHIP, P.O. BOX 99630, RALEIGH, NC 27624-9630.