

CDA MEN'S CLUB REGISTRATION 2008

PLEASE READ THE FOLLOWING CAREFULLY AS THERE HAVE BEEN SOME CHANGES FROM THE PAST.

- * IF YOU WERE A MEMBER LAST YEAR, JUST CHECK "RENEWAL". YOU DON'T HAVE TO FILL OUT GHIN OR CLUB NUMBER.
- * IF YOU ARE A NEW MEMBER AND DON'T HAVE AN ESTABLISHED HANDICAP AT ANY CLUB, THEN JUST CHECK "NEW MEMBER" AND WE WILL ESTABLISH A GHIN NUMBER FOR YOU.
- * IF YOU ARE A NEW MEMBER AND YOU **DO HAVE** AN ESTABLISHED HANDICAP, YOU MUST CHECK THE NEW MEMBER BOX AND FILL OUT THE GHIN AND CLUB (YOU WILL FIND THESE TWO ITEMS ON YOUR PERSONAL HANDICAP CARD). FAILURE TO DO SO WILL RESULT IN YOUR HAVING TO RE-ESTABLISH A HANDICAP.
- * PRINT YOUR NAME **LEGIBLY**. THAT MEANS FIRST AND LAST NAMES AS WELL AS MIDDLE INITIAL. WE HAVE OVER 500 MEMBERS AND THEREFORE HAVE SOME DUPLICATES OF NAMES.
- * PLEASE PRINT YOUR COMPLETE MAILING ADDRESS **LEGIBLY**. DO **NOT** JUST PRINT "SAME".
- * MEN'S CLUB FEES ARE \$50.00. RENEWALS PAID AFTER MAY 10th WILL BE \$70.00 (WHICH INCLUDES THE \$20 REINSTATEMENT FEE).

PLEASE MAKE CHECKS PAYABLE TO CDA GOLF MEN'S CLUB. STAPLE CHECK TO THE COMPLETED FORM, PLACE BOTH IN THE ENVELOPE PROVIDED (OR YOUR OWN ENVELOPE) AND DROP IN THE MEN'S CLUB BOX BY THE HANDICAP COMPUTER, OR MAIL TO: MEN'S CLUB, CDA GOLF CLUB, 2201 SO. FAIRWAY DRIVE, COEUR D'ALENE. ID 83814.

DATE: _____ DATE OF BIRTH: _____
RENEWAL: _____ NEW MEMBER: _____ GHIN# _____ (If applicable) CLUB _____
FULL NAME: _____
MAILING ADDRESS: (Street) _____ (City) _____ (Zip) _____

TELEPHONE: _____ E-MAIL ADDRESS: _____
PAYMENT RECEIVED BY: _____ AMOUNT: \$ _____ CASH ___ CHECK ___

Men's Club Members acknowledge that the rules of the USGA and our by-laws are the doctrines of the organization and that the elected officers are charged with their administration.

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