



WESTERN HILLS GOLF AND SOCIAL CLUB

2009 MEMBERSHIP APPLICATION

DATE:

NAME:

ADDRESS:

CITY:

HOME PHONE #

CELL PHONE #

EMAIL ADDRESS:

APPLICATION FEE PAID

_____ \$50 - MEMBERSHIP WITHOUT USGA HANDICAP

_____ \$75 – MEMBERSHIP INCLUDES USGA HANDICAP

PAYMENT TYPE: _____ CASH _____ CHECK
(MAKE CHECKS PAYABLE TO CASH)

**IF YOU CHOSE MEMBERSHIP WITHOUT USGA HANDICAP
PLEASE LIST BELOW WHERE YOUR USGA HANDICAP IS
LOCATED. A CURRENT USGA HCP IS MANDATORY FOR ALL
CLUB MEMBERS.**
