

____Application for Membership _____

Address:	
City, State & Zip:	
Phone:	
E-mail:	
Birth Date://	
Recommended by:	(GLSGA Member)
Fine Print: Applications must be mailed BY THE APPLICANT to: Great Lakes Senior Golf Association P.O. Box 728 Jenison, MI 49429-0728	
Applications will not be accepted by any other mean phone calls or any other method requesting members be acknowledged. Membership is granted in the order applications are received. Note that the waiting is and membership levels are limited. It is not unusury are to pass before a membership opening occurs. patient! No notice of receipt of the application of the applicant. However, one can find their name and the waiting list at www.glsga.org. Look for the wa	ship WILL NOT er in which list is large wal for several Please be will be sent to ad position on aiting list in
Internal GLSGA use only Application received:///	