



Great Lakes Senior Golf Association

Application for Membership

Name: _____

Address: _____

City, State & Zip: _____

Phone: _____

E-mail: _____

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18-hole handicap: _____ OR 18-hole average: _____

Birth Date: _____/_____/_____

Recommended by: _____ (GLSGA Member)

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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 means. E-mails, phone calls or any other method requesting membership WILL NOT be acknowledged. Membership is granted in the order in which applications are received. Note that the waiting list is large and membership levels are limited. It is not unusual for several years to pass before a membership opening occurs. Please be patient! No notice of receipt of the application will be sent to the applicant. However, one can find their name and position on the waiting list at www.glsge.org. Look for the waiting list in the INFORMATION drop down menu. **Keep a personal copy of this application for reference.**

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Internal GLSGA use only

Application received: _____/_____/_____