APPLICATION FOR MEMBERSHIP

Name in Full: _____ _____ _____
First Name(s) Surname M.I.

Date of Birth: DD /MM /YEAR ☐☐ / ☐☐ / ☐☐☐☐ Age _____

Nationality: _____

Occupation: _____

Postal Address: _____

_____

Residential Address: _____

_____

Contact Number: Cellphone Number _____ Land line_____

Fax (If any) _____ Email Address _____

Reference (2 members of the Golf Club with membership numbers with whom she has permission to give as reference)

Name	Club	Membership #

Other Club(s) to which the applicant belongs:

_____ _____

_____ _____

HANDICAP:

Present Handicap (if any) _____
Present Handicap Club _____

My Home Club will be _____

Date:

Dear Ma'am:

I apply to be admitted to the WOMEN'S GOLF ASSOCIATION OF THE PHILIPPINES and submit all requirements required on this form. If accepted, I undertake to be bound by the Rules and Regulations of WGAP, which are now, or hereafter maybe in force. I also agree to read and follow the rules and etiquette of golf.

Yours faithfully,

_____
Ladies Chapter President's signature

_____
Golf Club General Manager or Golf Director's signature

_____
Name and Signature

For office use only

Membership and Endorsement checked by:
Screened by: _____
Date: _____
Comments: _____