

The Golfari Club 2010 New Membership Application

SCGA Golfari Mens Club # SZ-26

WPLGASC Golfari Womens Club # FG-35

Please Print

Name: _____

Spouse: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

email Address: _____

Anniversary Date & Year: _____ Birthday - His: _____

Birthday - Hers: _____

Home Club Information (This information is very important.)

Club Name

Club Number

SCGA # / WPLGA #

GHIN # (If you have one)

His Club: _____

Her Club: _____

Membership Fees:

Amount Enclosed

Golfing Couple..... \$135.00

\$

Single Golfer - Male..... \$70.00

\$

Single Golfer - Female..... \$65.00

\$

* Membership Fees include SCGA / WPLGA fees

Non-Member - To Receive the Newsletter only..... **\$10.00**

\$

Total Paid:

\$

Fill out application form completely. Make checks payable to:

The Golfari Club

Mail check and application to:

**The Golfari Club
41-800 Washington Street B-105 438
Bermuda Dunes, CA 92203**

Signature: _____

Date of payment: _____

Note!! Each Golfari member must belong to the SCGA for the men or WPLGASC for the women as an Individual Member through "The Golfari Club". If you have already joined another club, you MUST still pay the SCGA and/or the WPLGASC fees for every club you join.

Do you have friends presently in Golfari? _____