

Players Club Card 2017

\$ 99 if paid by December 31, 2016

\$109 if paid after December 31, 2016

- () 2016 my SCGA handicap was at General Old Golf Course
- () 2016 my SCGA handicap was at _____ Course.
- () I did not have an SCGA handicap in 2016.

First Name

Last Name

Only complete information below if you have any changes.

E-mail address:

Address:

City

State

Zip Code

Home Phone

Cell Phone

Please return this completed application with a check for \$40 (payable to General Old Golf Course)

Mail to: General Old Golf Course,
16700 Village West Drive,
Riverside, CA 92518

Pro Shop Phone: (951) 697-6690

Web site: www.generaloldgolfcourse.com

E-mail: generaloldgolf@wildblue.net

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For Staff use:

New SCGA # _____ Date: ____/____/____

Entered Excel Spreadsheet Staff initials: _____

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NOTES :