

2017 WGC Membership Application Form

Name(s): _____

Address: _____

Telephone: _____

E-mail: _____

Golf Memberships: (Circle all that apply)

Student: \$150 Individual: \$585 Individual Under 35: \$350

Family: \$825 Jr. Family: \$649 (Husband or Wife under 35 years old)

New Member: \$350 Range membership: \$150 (Free if Membership is paid by March 31)

Locker \$40 Floor Storage \$30

GHIN \$25 FREE in house Handicap Service _____

All league fees will be collected at the beginning of the league season.

Please check the league you are interested in playing in.

Men's A.M. league: _____ Men's P.M. league: _____

Ladies A.M. League: _____ Ladies P.M. League _____

Indicate MasterCard or Visa Card #: _____

Exp. Date: _____

Total enclosed: \$ _____

Please send form and payment to:

Wawenock Golf Club

P. O. Box 766

Damariscotta, Me. 04543-0766

Email Wawenock@live.com

You can also purchase online at wawenockgolfclub.com