

Twin Hills C.C.

Men's Club

Member Application

Name _____

Address _____

Town _____ ZIP _____

HOME Phone () _____

WORK Phone () _____

CELL Phone () _____

E – MAIL ADDRESS _____

GHIN Number _____ Hcp. _____

What time do you like to Tee off on Sunday? _____

WHO DO YOU KNOW IN THE MEN'S LEAGUE?

1. _____
2. _____
3. _____
4. _____