

LADIES GOLF LEAGUE

2025 Club Application

Name <u>:</u>		Phone:
Address: _		
City:		Zip:
Email Address:		GHIN #
GHIN Esta	blished at what Cour	se?
What is Your Level of Play? _		Beginner Intermediate Advanced
Emergenc	y Contact Name/Pho	ne#:
How Did You Hear About Us?		Social Media/Website Other (fill in)
	-	Referral (provide name:)
WHAT: WHEN:	Echo Falls Ladies G Every THURSDAY k	iolf League for all Ages & Skill Levels! between April 3 - September 11, 2025 es Varying from 5:00PM - 5:30PM Weekly
COST:	\$125 Annual Dues (by April 3rd), \$150 Annual Dues (Apr 4th forward) Approx \$40 League Fee (includes 9 holes/golf cart each Thursday evening)	
AnnuPrizesEnd o	start March 20th - 27 Ial dues include 2025 Is awarded weekly fol Infyear banquet include	th. Thursday afternoon tee times at league rate above) Official USGA GHIN Handicap registration r game play, additional funds awarded for birdies/eagles des dinner, awards, and no-host bar. s for food/drinks after game play, with discounted food.
Signature:		Date:

League Dues Paid

GHIN Registered

For League Use Only: