

New Hampshire Senior Golfer's Association

Proposal for Membership

Applications must be proposed by a current member.

Date: _____ 201__ (Please print)

Name in full: _____

Date of birth: ___/___/_____ Home course/club: _____

GHIN # (or other handicap system): _____

Home address: _____

(city) (state) (zip code)

Mailing address: _____

(if different than above)

(city) (state) (zip code)

Home Phone : _____ Cell Phone : _____

E-mail address: _____

As a member in good standing of the NHSGA, I _____, propose the above named golfer, knowing him personally, and recommending his application for membership.

Article 6, Section 1 of the By-laws: Any man, who has reached the age of 55 years and is a *resident of the State of New Hampshire or belongs to a golf club in the State of New Hampshire*, is eligible for membership.

Please accompany this application with \$10 non-refundable fee.

If you join, the \$10 will be credited towards your first year of membership.

Please make the check out to: NHSGA

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**Mail the Application to: NHSGA  
P.O. Box 9  
Sanbornton, NH 03269**

Date received: \_\_\_\_\_ Position on current wait list: \_\_\_\_\_

Notification Sent: \_\_\_\_\_ 201\_\_ Mailed Dues on: \_\_\_\_\_ 201\_\_