

CINCINNATI RECREATION WOMENS GOLF ASSOCIATION

2024 MEMBERSHIP APPLICATION

Please circle one: **Renewal** **New Member**

Date _____

Name: _____

(Last)

(First)

(MI)

Home Address: _____

Phone #: _____

City: _____

State: _____

Zip code: _____

E-Mail _____

GHIN # _____

_____ Please check if this is a new address or email change.

_____, a Cincinnati Municipal Golf Course, is the course at which I

will be entitled to compete for this year's CRWGA Club Championship and is the course where my GHIN

HANDICAP will be listed.

MEMBERSHIP ENTITLES ME TO:

- GHIN Handicap • CRWGA Yearbook • CRWGA Bag tag
- Play on the CRWGA Travel Team .
- Play in all CRWGA sponsored events.

2024 TRAVEL TEAM DATES ARE:

May 11 Woodland)

June 1 (Neumann)

June 15 (California)

July 13 (Reeves)

July 27 (Avon)

August 3 (2 Person Best Ball Tourn at Reeves.)

August 17 (Glenview)

I do hereby apply for a membership in the Cincinnati Recreation Women's Golf Association. I agree to abide by the by-laws of the association as they are interpreted by the CRWGA.

Please sign _____

ANNUAL DUES \$50.00 Make check payable to: CRWGA

DO NOT GIVE TO GOLF COURSE

DO NOT MAIL TO CRC

Please send to:

Mary Matthews.

1210 N. Riverside Dr. #109.

Pompano Beach, Florida 66032.

After March 15 (new members only) send to:

Mary Matthews

4175 Homelawn Ave

Cincinnati, Ohio 45211

Return By March 15, 2024

