



# 2020 Membership Application

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ GHIN# \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE of BIRTH \_\_\_\_\_ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_ NEW MEMBER (Y/N) \_\_\_\_\_

NEW MEMBER ONLY, AVERAGE 18 HOLE SCORE \_\_\_\_\_ HANDICAP \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS-**

I PLAN TO PLAY FROM THE \_\_\_\_\_ TEEBOX MOST OFTEN (GREEN / WHITE / BLUE)

I PLAN TO PLAY IN OPENING DAY ON MAY 3<sup>RD</sup>, 8 AM SHOTGUN (Y/N) \_\_\_\_\_

I PLAN TO PLAY IN THE PRESIDENTS CUP MATCH PLAY BRACKET (Y/N) \_\_\_\_\_

I PLAN TO PLAY IN THE 3-DAY MEMBER/MEMBER TOURNAMENT (Y/N) \_\_\_\_\_

IF ASKED, I WOULD PLAY IN THE RYDER CUP VS. ORANGE HILLS (Y/N) \_\_\_\_\_

SUGGESTIONS FOR THE UPCOMING SEASON \_\_\_\_\_

All Applications must be accompanied by appropriate CHECK(s) made out as follows:

Check #1 – Men’s Association Dues **\$175** “Grassy Hill Men’s Association”

Check #2 (optional) – Preferred Tee Times **\$95** “Grassy Hill Country Club”

Mail Checks and Applications to:

or drop off in GRASSY HILL PRO SHOP

**Grassy Hill Men’s Association**  
**PO Box 3677**  
**Milford. CT. 06460**

**\*\*\* Support The First Tee (optional) – suggested minimum donation is \$25 \*\*\***

**Turn in Applications before April 3<sup>rd</sup> to insure GHIN activation before Opening Day.**

Questions? Email - [ghma.membership@gmail.com](mailto:ghma.membership@gmail.com)