



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 3RD, 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 3rd to insure GHIN activation before Opening Day.

Questions? Email - ghma.membership@gmail.com