



# Michigan Seniors Golf Association Membership Application

DATE \_\_\_\_\_

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY-STATE-ZIP CODE \_\_\_\_\_

DATE OF BIRTH    MONTH \_\_\_\_    DAY \_\_\_\_    YEAR \_\_\_\_

OCCUPATION \_\_\_\_\_

PRIMARY PHONE # \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

GAM # \_\_\_\_\_    WIFE'S NAME \_\_\_\_\_

CURRENT CLUB AFFILIATION \_\_\_\_\_

PRIOR CLUB AFFILIATION AND YEARS YOU WERE A MEMBER

\_\_\_\_\_ FROM \_\_\_\_ TO \_\_\_\_

SPONSOR \_\_\_\_\_

ADDITIONAL MSGA MEMBERS KNOWN (At least two) \_\_\_\_\_

I authorize the Michigan Seniors Golf Association to verify all statements and representations made by me or on my behalf. If accepted, I agree to abide by the rules of the Association and know that the initiation fee of \$200 and the first year's dues of \$110 are non-transferable and non-refundable.

APPLICANT SIGNATURE \_\_\_\_\_

SPONSOR SIGNATURE \_\_\_\_\_