



MEMBERSHIP FORMS

MEMBERSHIP FORM

or register online at: www.golfinggreys.com

Please fill out all fields - one for each applicant

NAME (first, last)

ADDRESS

ADDRESS 2

CITY

PROV / STATE

PC / ZIP

PHONE

EMAIL

HANDICAP HOME COURSE

I am 50 years old or older as of today's date.

PAYMENT = \$50.00 + GST (\$3.00) = \$53.00 CAD

TYPE: Cash Visa Mastercard Chq/M.O.

TOTAL PAYMENT: _____

EXACT NAME ON CARD

Grid for name on card

CARD NUMBER

Grid for card number

CARD EXPIRY

Make cheques payable to:
GOLFING GREYS
PO Box 22005 - Downtown
Brandon, Manitoba R7A 6Y9
Fax: 204-725-7218

OFFICE USE ONLY _____,200

PICTURE

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