

APPLICATION FOR LWGA MEMBERSHIP

Landings Women's Golf Association

I hereby apply for membership in the Landings Women's Golf Association (LWGA). Enclosed is my payment for membership. The membership year is from January 1 through December 31. For those joining on or after June 30 of any year, the membership fee is half of the remainder of the membership year, plus five dollars for the "Hole-In-One" fund.

Check One: Full year (\$50.00) _____ After June 30 (\$30.00) _____

NAME: _____
Print – Last
First
Name You Use

ADDRESS: _____ AREA: MP PL OR FC DC MW MRL MSH MVL
Street
(Circle One *)

CONTACT NUMBER: _____ RESIDENT SINCE: _____ CLUB MEMBERSHIP # _____

PRIOR RESIDENCE: _____ USGA INDEX: _____
City
State

EMAIL: _____ please print (use restricted to LWGA business)

APPLICANT'S SIGNATURE: _____ DATE: _____

This application may be mailed along with a check for \$50 to:

Carol Bowen
 6 Fen Court, Savannah, GA 31411
 or

This application may be completed online under Membership/ Membership Application at www.LWGA.net . If completing the application online, a check will have to be mailed to the above address.

*Area Designations:

MP: Midpoint	DC: Deer Creek
PL: Plantation	MW: Marshwood
OR: Oakridge	MRL: Moon River Landing
FC: Franklin Creek	MSH: The Marshes
	MVL: Marsh View Landing

Skills Survey:

If you have expertise in any of the following areas and wish to share it, please let us know by checking all that apply.

- Accounting
- Publicity
- Photography
- Graphic Design
- Writing & Editorial
- Word, Excel etc.
- Other, Please Specify _____