



New Haven Golf Club

P.O. Box 120036
East Haven, CT 06512

Membership Application

(New Members only)

Name: _____

Address: _____

Town: _____ **Zip Code:** _____

Phone Numbers: (Home) _____ **(Cell)** _____

Email: _____

Are you presently a member at any other golf course or country club **Y () N ()**

If yes, **Club Number:** _____ **GHIN Number:** _____

Are you now, or have you been under USGA restrictions for play, or have you ever been expelled from any golfing association? **Y () N ()**

If yes, please explain why? _____

Give the names of two sponsors, present members in good standing with the New Haven Golf Club, Inc.

1. _____ 2. _____

Signature of Applicant: _____

Association dues: (Dues must accompany application)

Regular Member (18-59):	\$100.00
Senior Member (60 & above):	\$100.00
Junior Member (17 & under):	\$25.00
Female Member (handicap only):	\$20.00

Make check payable to:

The New Haven Golf Club, Inc.

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