

# 2018 PRAIRIE FALLS WOMEN'S GOLF LEAGUE REGISTRATION FORM

## PLEASE PRINT

Name: \_\_\_\_\_  
(First) (Initial) (Last)

Mailing Address: \_\_\_\_\_  
(Street or PO Box)

\_\_\_\_\_  
(City) (State) (Zip code)

Phone numbers: \_\_\_\_\_  
(Home) (Cell) (Work)

E-mail address: \_\_\_\_\_  
(Please print clearly)

## Please check one of the following:

- \_\_\_\_\_ New member  
\_\_\_\_\_ Member of 2017 Prairie Falls Women's Golf Club  
\_\_\_\_\_ Associate member\* (GHIN fee paid thru another club)  
\_\_\_\_\_ Transferring from another club

## Check One:

\_\_\_\_\_ Morning Tee Times \_\_\_\_\_ 4:45pm shotgun \_\_\_\_\_ 5:30pm shotgun \_\_\_\_\_ Undecided

**GHIN Number** (if you had one in the last two years): \_\_\_\_\_

Please enclose a check for \$68.00 (\$36.00 GHIN fee + \$32.00 PFWGC fee) payable to **'Prairie Falls Women's Golf Club'** for the 2018 golf season. \*Associate members, already having paid the GHIN fee thru another club, only owe the \$32 PFWGC fee.

Please send your check, along with this completed form to:

Prairie Falls Women's Golf Club  
Attn: Tia VanBrunt  
3200 N. Spokane Street  
Post Falls, ID 83854

For Handicap Chairman

Date activated: \_\_\_\_\_

Local Number: \_\_\_\_\_