

Jackson Jills Golf Club

Application for 2018 Membership

Name (please print)		
Address	Telephone	
City/State	_ Zip CodePr	eferred Phone # ()
Email	GHIN#	Handicap Index
for weekly competitions, tourn Golf and \$1 for Hole-in-one po Complete this application Write a check for \$	naments etc, \$36 GHI arty. If interested in a ation form	
played? Have you played Jack	kson Park Golf Course? Ke sure new members c	ng experience. How long have you We do not require a qualifying an play the course in close to 4 ½ ?
For more information about the Membership Chair, Tori Boyle find a description of the Jills www.premiergc.com, - click on	s at <u>VGBoyles@msn.co</u> on the Jackson Park G	m (425-481-0546). You can also Folf Course website at
Constitution and Bylaws. Pleas	se sign below that, upo	lls yearbook which contains our In becoming a member, you hereby on Jills Golf Club and adhere to the
Signature		Date