

REGISTRATION FORM 2023

Register electronically at hhwgl.ca and send fee by etransfer

OR complete form below

Name: _____ Membership: New ___ Return: Putter ___
Chipper ___
Driver ___

I play mostly after 5:00p.m. Yes ___ No ___

NOTE: All after 5:00p.m. members will be Chippers.

If you are a returning member, you will be assigned to the same group as you were in last year (**Putters, Chippers, and/or Drivers**), unless you request a change. If you are a new member, every effort will be made to place you in the section with someone that you already know.

Address _____(OR same as last year___)

Golf Season Phone #: _____ Alternate Phone #: _____ (OR Same___)

E-mail Address: _____(PRINT CLEARLY) (OR same___)

Please, indicate your fee choice for an **HHWGL Basic Annual Membership**. No requirement to join the GAO to play. Golfers of ALL skill levels are welcome. **Includes nametag for new members only.**

Tuesday 9 holes	(no handicapping)	\$40.00	_____
Wednesday 18 holes	(handicapping)	\$40.00	_____
Both Wednesday 18 holes and Tuesday 9 holes		\$50.00	_____

Optional Annual Fee** for joining the Golf Association of Ontario (GAO), for players who wish a Canadian Ladies Golf Association card and the GAO Benefits. This membership will track your official handicap. \$45.20 _____

***GAO fee subject to change

Replacement name tag required by a **returning** HHWGL member \$10.00 _____

TOTAL FEE SUBMITTED by Cheque No. _____ \$ _____

PLEASE NOTE: THERE WILL BE NO REFUND AFTER MAY 31ST nor will there be a refund IF YOU HAVE PLAYED MORE THAN TWO TIMES BY THAT DATE.

I am willing to assist (in a minor capacity and with direction) with:
Tournaments ___ Prizes ___ GAO ___ Bulletin Board ___ Other ___ Board Position _____
(please support your league)

Mail completed **form** to:

Lynne Brady
462 Martin's Rd., Fenelon Falls ON K0M 1N0
Phone #: 705 887-4230 Email: lynnebrady10@gmail.com

Mail cheque **PAYABLE TO HHWGL** to:

Christina Carere
1266 MacKin Trail, Minden, On K0M 2K0
Email : c.carere@bell.net