

CINCINNATI RECREATION WOMENS GOLF ASSOCIATION

2025 MEMBERSHIP APPLICATION

Please circle one: **Renewal** **New Member**

Date _____

Name: _____

(Last)

(First)

(MI)

Home Address: _____ Phone #: _____

City: _____ State: _____ Zip code: _____

E-Mail _____ GHIN # _____

_____ Please check if this is a new address or email change.

_____, a Cincinnati Municipal Golf Course, is the course at which I will

be entitled to compete for this year's CRWGA Club Championship and is the course where my GHIN

HANDICAP will be listed.

MEMBERSHIP ENTITLES ME TO:

- GHIN Handicap • CRWGA Yearbook • CRWGA Bag tag
- Play on the CRWGA Travel Team .
- Play in all CRWGA sponsored events.

2025 TRAVEL TEAM DATES ARE:

May 10 (Woodland)

May 31 (Neumann)

June 14 (Avon)

June 28 (California)

July 19 (Reeves)

August 2 (2 Person Best Ball Tournament at California.)

August 16 (Glenview)

I do hereby apply for a membership in the Cincinnati Recreation Women's Golf Association. I agree to abide by the by-laws of the association as they are interpreted by the CRWGA.

Please sign _____

ANNUAL DUES \$50.00 Make check payable to: CRWGA

DO NOT GIVE TO GOLF COURSE

DO NOT MAIL TO CRC

Please send to:

Mary Matthews

1210 N. Riverside Dr # 109

Pompano Beach, Florida

33062

NO LATER THAN MARCH 10th.