

VICTORIA PAN AMERICAN GOLF ASSOCIATION CHAPTER
P.O. Box 3872
VICTORIA, TEXAS 77903-3872

Membership Application

APPLICANT: _____ REFERRED BY: _____
ADDRESS: _____ HOME PHONE: _____
CITY/ZIP CODE: _____ CELL PHONE: _____
DATE OF BIRTH: _____ WORK PHONE: _____
SPOUSE'S NAME: _____ EMAIL ADDRESS: _____

TYPE OF MEMBERSHIP APPLYING FOR: **REGULAR** **ASSOCIATE**

1. Have you ever been a member of the Victoria PAGA Chapter or any other PAGA chapter?
 YES NO If yes, when? _____ , where? _____

2. If applying for a regular membership, do you have an established handicap?
 YES NO If yes, Handicap: _____ Handicap Index: _____
Name of golf course? _____ If no, average score: _____

3. If applicable, does your spouse play golf? YES NO

4. In accordance with by-law Article VIII, if a member commits to play in a tournament, participates in an activity, or incurs debt that will cost the Association; he/she will be liable for the costs and agrees to reimburse the Association.

5. All members are required to abide by the constitution Article II, Section I:

PURPOSE: "To promote within this group a higher interest in the betterment of golf in the city of Victoria and vicinity, to encourage and participate in all other activities of this association." Non-participation will be held as an act in violation of the constitution and by-laws Article III, Section I, at which the Executive Board shall have the power to expel any such member. Action will be taken after written charges, sufficient evidence and proper notice is given to the accused and all evidence has been presented to the Board.

6. Regular membership dues are \$50.00; Associate dues are \$30.00; and annual renewal dues are \$40.00. A late renewal penalty of \$10.00 will be assessed after August 31st. Charter member dues are waived.

I UNDERSTAND AND AGREE TO THE TERMS HEREIN ABOVE AND WILL ABIDE BY THE CHAPTER'S CONSTITUTION AND BY-LAWS, WHICH I AM ENTITLED TO RECEIVE BY REQUESTED UPON BECOMING A MEMBER OF THE VICTORIA PAN AMERICAN GOLF ASSOCIATION.

APPLICANT: _____ MEMBER: _____
DATE SUBMITTED: _____