



**RANCHO DUARTE GOLF CLUB MEMBERSHIP APPLICATION**

**A MEN'S AND WOMAN'S GOLF CLUB**

**APPLICANT INFORMATION**

**CLUB CODE: 0349**

By completing this form you are aware that the R.D. Golf Club will be sharing your information with the SCGA

**Applicants Name:**

**\* E-Mail Address:**

**\* By providing your email address you are approving the R.D. Golf Club to sending you electronic correspondence**

**Current/New GHIN #:**

**Cell Phone #:**

**Home Phone #:**

**Home Address:**

**City:**

**State: California**

**Zip:**

**EXISTING GOLF CLUB AFFILIATION INFORMATION**

**GOLF CLUB #1**

**GOLF CLUB #2**

**EMERGENCY CONTACT**

In case of an emergency who can we contact on your behalf

**Name #1:**

**Phone:**

**Name #2:**

**Phone:**

**Relationship #1:**

**Relationship #2:**

**SPOUSE INFORMATION**

**Spouse Name:**

**CLUB MEMBER REFERRAL**

**Referred By:**

**Other:**

**Phone:**

**SIGNATURES**

I agree to become a Member of the Rancho Duarte Golf Club and I agree to abide by all USGA Rules of Golf.

**Signature of applicant:**

**Date:**

**Approved by:**

**Date:**