



FOR CLUB USE ONLY:
CLUB CODE: _____

NEW JUNIOR MEMBER APPLICATION

Complete this form and return to your club. Illegible applications will not be processed.
PLEASE PRINT CLEARLY. ALL FIELDS REQUIRED.

Does junior have an existing GHIN number? YES NO

SCGA or GHIN NUMBER:

PREFIX (Includes Dr., Gen., Col.): _____ SUFFIX (Includes Jr., Sr., MD, DDS, III): _____

NAME: _____

ADDRESS: _____

CITY: _____

STATE/PROVINCE: _____ ZIP/POSTAL: _____ COUNTRY: _____

DATE OF BIRTH(required): (Month/Day/Year) ____/____/____ TELEPHONE: _____

EMAIL ADDRESS (required): _____

MALE FEMALE

ETHNICITY:

- African American
- Asian/Pacific Islander
- Caucasian
- Prefer not to answer
- Hispanic
- Multiracial
- Native American
- Other

This authorizes the Southern California Golf Association to issue an SCGA membership card. Member cards will be available for pick up at your club in 10-14 days. Unless already established, applicant will establish an index by posting scores.

DATE _____ APPLICANT'S SIGNATURE (or legal guardian) _____

CLUB NAME: _____

AUTHORIZED BY: _____

FOR CLUB USE ONLY: **SUPERVISED** **UNSUPERVISED**