

*DRAGONFLY WOMEN'S
CLUB APPLICATION*

Date: _____

Name: _____

Birthdate: _____

Address: _____

Cell nbr: _____ or

Home nbr: _____

E-mail address (important for playday info):

Do you have a USGA handicap index?

Yes _____ No _____

If yes, GHIN no. _____



*Shotgun start every
Thursday morning*

*Special rate
(green fees & cart) on
Dragonfly Women's Club
play days*

*Different games each
week for \$6.00 fee*

*Membership
Dues \$60*

*Includes membership in
NCGA (Northern
California Golf
Association) and a USGA
handicap index*

*Opportunities to play in
competitions outside of
regular club play and
other club social functions*

*Golfers of all skill levels
welcomed*

**PLEASE MAKE YOUR
CHECK PAYABLE TO
DRAGONFLY WGC &
MAIL IT AND THE
APPLICATION TO:**

*Sharon Bradshaw
Membership Chair
453 W Omaha Ave
Clovis, CA 93619-4802*