



ROSE PARK  
*Golf Course*

MEN'S ASSOCIATION  
MEMBERSHIP APPLICATION

DATE \_\_\_\_\_ NEW  RENEWAL

UGA Club# \_\_\_\_\_ Player \_\_\_\_\_

All Members Must Have a Valid  
UGA Handicap Card

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City &  
Zip: \_\_\_\_\_

Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/19\_\_\_\_

**DUES \$25.00**

CASH  CREDIT