

PECAN GROVE PLANTATION COUNTRY CLUB
WOMEN'S GOLF ASSOCIATION
MEMBERSHIP FORM

Name _____

Address _____

Email Address (WGA announcements and information will go to this email)

Home Phone _____ **Birthday (Month/Day Only)** _____

Cell Phone _____ **Work Phone** _____

Husband's Name _____

Please indicate in which group you will be participating and if you have an established handicap index

☐ **Wednesday 9 Hole Division**

☐ **Saturday 9 Hole Division**

☐ **Wednesday 18 Hole Division**

☐ **Saturday 18 Hole Division**

☐ **I do not have a handicap**

My handicap is _____

WGA Membership dues are \$45/year and \$2 for the Hole-in-One Club*. The club will bill your account or you may pay by check. Please indicate your payment choice below.

***If you do not wish to participate in the Hole-in-One Club, please advise the club's Accounting Office to remove your name. This is an initial fee and will only be billed again when a hole-in-one occurs, to replenish the fund.**

☐ **Membership paid through my club account No.** _____

☐ **Membership paid by attached check**

Signature **Date** _____

Please return the completed form to WGA Vice-President or the Pro Shop.
Form may also be mailed to Pecan Grove WGA, 3000 Plantation Dr, Richmond, TX 77406.