



## **2018 Membership Application Form**

**Membership Fee \$50.00**

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

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**You must be a paid-up member of the I.C.M. before you can join the ICMGS**

I.C.M. Membership Number \_\_\_\_\_

**NEW MEMBERS:** Are you/were you a member of a golf club or golf society

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide your latest handicap \_\_\_\_\_

### **Sponsors:**

Full sponsorship \$400    Half-sponsorship \$200    Group Sponsorship

Are you willing to sponsor a tournament?    Yes \_\_\_\_\_    No \_\_\_\_\_