



## **2021 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** \_\_\_\_\_