

WATERLOO JUNIOR GOLF ASSOCIATION



WJGA MEMBERSHIP APPLICATION

First Name

Last Name

Street Address

City

State

ZIP

Home Phone

Cell Phone

Age on June 17, 2019

Date of Birth

Gender Male Female

mm/dd/yyyy

Will you be playing on a high school golf team this year?

Yes

No

If so, at what school?

Emergency Contact Person

Emergency Contact Phone

Preferred Email Address

Membership fees cover about half of the operating costs of the WJGA. Donations by families and businesses make up the difference. **Please consider supporting the WJGA by becoming an Adult Contributing Member for a tax-deductible contribution of \$10 or more.**

Yes, I wish to be an Adult Contributing Member in the amount of \$ _____

*Mail application and check for your membership fee of \$50 (plus your Adult Contributing Membership contribution, if applicable) to: **WJGA, P.O. Box 1208, Cedar Falls, IA 50613***