



2019 Senior Men's League

New Member Registration or Change of Information Form

Returning members will start the 2019 season with their 2018 ending league handicap

Preferred First Name: _____ Last Name: _____

Phone # _____ Alt. Phone# _____

Email Address: _____

Address _____

City, State & Zip _____

Birthday (MM/DD/YYYY): _____

New Members: *What is your average 18 hole score from the GOLD Tees?* _____

***You will receive a league handicap after your first 3 rounds.*

***You are NOT eligible for weekly prize money or CTP contests until you have played 3 rounds!*

Are you sponsored by a current league member? Yes No

Member Sponsor's Name: _____

How did you hear about the league?

Friend Newspaper Clipper Magazine Email Staff at Crossgates

Other: _____

STAFF USE ONLY

Date Registered: _____ Paid \$5: _____ Staff: _____

Account Info created and added to the master list: Yes No