



RIVERRIDGE

Women's Club

2019 Application

\$60.00

Please Print

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email _____ DOB _____

Were you a member of the RiverRidge Women's Club Last Year:

Yes____ No____

If **Yes**, your information is on record and you do not need to provide your GHIN and Club #.

If No, please continue.

If you are transferring from another club, please fill out the information below (the cashier in the Pro Shop can make a copy for you). If you are transferring and do not have a card, please provide the GHIN number and the name of the club where you were a member.

TRANSFERRING MEMBERS

_____ GHIN# _____
(Course Name) (Club #)

(You will be assigned a new GHIN number if a handicap was not established in the past year)

Member Agreement

Please read carefully each item below and acknowledge with your initials in the space provided

As a member of RiverRidge Women's Club I acknowledge the following:

*All members will play by and adhere to the Rules of Golf, established by the USGA. _____

*Unsportsmanlike conduct may result in disqualification, suspension or both, from club activities and at the discretion RiverRidge Golf Course. _____

*All members are responsible to post scores in accordance with the Oregon Golf Association Handicap System, using the equitable stroke rule. _____

*All members without USGA handicaps will play with a modified handicap until their handicap is posted by the OGA (generally a minimum of five scores). _____

*In keeping with "Green Friendly" policies of RiverRidge Golf Course, members are to use "Soft Spikes" on their golf footwear. _____

Signature x _____ Date _____

FOR OFFICE USE ONLY

TRANS # _____ **DATE** _____ **CASHIER** _____