



**Puerto Rico Golf Association
New Member – Club Information Sheet**

Club's Information

Club Name: _____

Club Mailing Address: _____

Club Physical Address: _____

Tel: _____ Email: _____

Website (if applicable): _____

Actual No. of Members: _____ Registration Date: _____

Contact Information:

Name of the Professional: _____

Tel: _____ Email: _____

Name of the Administrator: _____

Tel: _____ Email: _____

GHIN® Handicap Program:

Is your Club interested in using the service of the USGA/GHIN® Handicap Program?

Yes _____ No _____

How many of your members will be using service? _____

When do you plan to start using the service? (Date MM/YY) _____

