

Ocean State Women's Golf Association

PO Box 597 Portsmouth, RI 02871-0597

www.oswga.org

Application for Annual Membership

□Individual Membership - \$50	☐ Junior Membership - Free
Please make checks payable t	o OSWGA and send with this form to:
OSWGA PO Box 597 Portsmouth, RI 02871-0597	
Name:	Date of Birth:
Street Address:	
City:	State:Zip:
E-mail address:	
Cell Phone #: ()	Home Phone #: ()
Club Affiliation:	GHIN:
If you do NOT have a GHIN; Please spand provide your identification numb	ecify the service that keeps your handicap er:
Handicap Service:	ID Number:
Please note: A USGA Handicap Index obtained from an authorized golf association, licensed by the USGA to utilize a USGA Handicap System, is required to compete in an OSWGA tournament with adjusted strokes. Any participant without such a handicap index will play at scratch.	

To be eligible for Player of the Year, dues MUST be postmarked by April 1, 2021 Membership fees are not tax deductible.