A logo for a golf club

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**2025 Rutgers Golf Association (RGA)**

**Membership Application**

**Please print this page, enter your information, sign the application and mail it along with your check.**

**My membership status…**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | I am a returning 2024 Member $125.00 Fee |  | | | |
| I am a New Member $125Fee | | | | | |
|  | I am applying for half season membership $75.00 |  | Opening Day through July 27th |  | July 31st through Closing Day |

I hereby apply for membership in the **RUTGERS GOLF ASSOCIATION** for the ***2025*** season.

I agree to abide by all USGA Rules, Rutgers Golf Course Local Rules, and Rutgers Golf Association Tournament Rules during all Rutgers Golf Association Tournaments. Enclosed is my payment - check or money order only, payable to **Rutgers Golf Association** -- do not send cash in the mail. Please mail this completed application form to:

**R.G.A.**

**P.O. Box 803**

**Piscataway, NJ 08855**

***IMPORTANT! No application forms or cash payments will be accepted in the Rutgers G.C. Pro- Shop.*** All applications must be received by Mail at the address above.

Please Print Clearly the following information:

**Name: Date of Birth:**

**Address:**

**City, State, Zip :**

**Email Address:**

**Phone:**

**PLEASE PROVIDE ANSWERS TO THE FOLLOWING QUESTIONS**

1. **Do you have a current handicap? \_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **If yes, what is your current handicap? \_\_\_\_\_\_\_\_\_\_\_\_**
3. **If you have a valid GHIN please provide \_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Which tee box will you be playing from? Scarlet, Black or White? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature Date Check Number