

PLAINFIELD WEST NINE

c/o Plainfield Country Club

PO Box 311

Plainfield, NJ 07061-0311

www.plainfieldcc.com

2009 APPLICATION

Member No:

Name: (PRINT)

Home Address:

Home Phone:

Business Phone:

Date of Birth:

Email Address:

The following are the fees for membership:

		Check One
Regular Member	\$95.00	<input type="checkbox"/>
Senior Member (62 years & Retired)	\$69.00	<input type="checkbox"/>
Junior Member (12 to 17 years)	\$69.00	<input type="checkbox"/>
U.S.G.A. Handicap	\$25.00	<input type="checkbox"/>

Ghin # _____

Signature _____

Date _____