

EMPIRE RANCH SENIOR MEN'S GOLF CLUB – 2022 MEMBERSHIP APPLICATION

NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

E-MAIL _____ **PHONE:** _____

GHIN #: _____ **Were you a member of this club in 2021? Yes () No ()**

Please mail this application and a check for \$55 to the **EMPIRE RANCH GOLF COURSE, 1875 Fair Way, Carson City, NV 89701** or drop them off at the **EMPIRE RANCH GOLF COURSE PRO SHOP**. Make your check out to **Senior Men's Golf Club**. The application fee for Associate Members is \$30.

Date Received: _____ Check No. _____ Cash () _____

REGULAR MEMBER () ASSOCIATE MEMBER ()