Office Use Only

Date Rec'd _____

Correspondence Date _____

Notes:

☐ I am interested in becoming a member ☐ I am renewing my membership

Please print clearly

Name: _____ GHIN: _____

Address: _____

City/Zip: _____ DOB: Mo/Day _____

Primary Phone: _____ Second No: _____

Email: _____ Name of Spouse/Partner: _____

Emergency Contact & Number: _____

List other clubs you are a member: _____

Annual Golf Club Fees – Make checks payable to: David L. Baker Ladies Golf Club or DLBLGC
Mark an "X" next to the fee you are enclosing. New Members and Renewing Members – Mandatory Membership in Southern California Golf Association (SCGA). Fee paid directly to SCGA. * Denotes an optional fee.

_____	DLBLGC Annual Membership Dues	$40.00
_____	*Women's Public Links Golf Association Dues (WPLGA-optional)	$20.00
_____	New Members Only - Application Fee (non-refundable)	$10.00
_____	New Members Only-DLBLGC Hole in One Fund (optional)	$ 5.00

Check No: _____ TOTAL: $_____

Mail your complete application form and check to DLB Membership Chair: Laurey Venn, 1500 Mesa Verde Drive East #A405, Costa Mesa, CA 92626 - Questions: Email Laurey at laureyvenn1@gmail.com

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*Membership in WPLGA permits your participation in monthly Association Play Days, 5 major regional tournaments, a Far Away from Home Tournament and Team Play, if offered.
Hole in One Fund entitles "winner" to small a cash prize and funds to pay for celebratory round.
Rev: NOV1825