

CASCADE GOLF COURSE
2017 MEN'S CLUB APPLICATION

Name _____ Date _____

Please asterisk if address, phone, or Email address have changed

Address _____

Cell _____ Home phone _____

Email address _____

Have you ever had a GHIN handicap? If so, what was your previous

GHIN Number _____ Club Number or Name _____

Check here if new member ___ and receive a free round of golf!

Dues are \$50.00 per year

Juniors (17 & under) \$5.00 per year. Date of birth (required) _____

Total paid _____ Form of payment _____ Date _____

Signature _____

Mail To:
Cascade Golf Course
14319 436th Ave SE
North Bend, WA 98045

Phone (425)888-4653