CRANBERRY VALLEY 9-HOLE WOMEN'S GOLF ASSOCIATION

Name Date			Date	
Please Print				
Mailing address				
	Street (PO Box)			
	Town		Zip Code	
Cranberry Valley Golf ID#		GHIN #	GHIN #	
	If you do not have a		Please renew online with GHIN # your application will be placed on a	
E-mail address	8			
Cell phone:		Home phone if preferred:		
Green	Red	AGED TO DESIGNATE G	REEN TEES.	
Full participatincludes the we	ekly purse money. <u>FC</u>). \$125.00 if received aft OR SOCIAL MEMBERS T	er Dec 1, 2025. The membership fee HERE IS NO CHARGE	
Full member	Social member			
Please make yo	our check payable to C	CV-9. Send both check a	nd application by December1, 2025:	
		Emily Baldwin P.O Box 634 West Harwich, MA 026	71	
Please circle th	e committee(s) you ar	e interested in joining:		
Weekly Tourn	ament Committee		Sunshine Committee	
Member/Guest	tTournament Commit	tee	Ambassador Committe	
Social Commit	tee			