



## 2009 SNEWGA INFORMATION SHEET

Please return this **completed form along with \$30** for annual club dues **(due before March 1)**. Make **check payable to SNEWGA** and send to:

Donna Pauzé  
39 Abbott Road  
Ellington, CT 06029

CLUB NAME \_\_\_\_\_ PRO NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PRO SHOP PHONE \_\_\_\_\_

RATING \_\_\_\_\_ SLOPE \_\_\_\_\_ PAR \_\_\_\_\_

DRIVING RANGE? YES NO PRACTICE GREEN? YES NO

BANQUET FACILITY? YES NO GPS ON COURSE CARTS? YES NO

DOES YOUR LADIES CLUB AND/OR GOLF COURSE HAVE A WEB SITE? Provide links below:

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### CLUB INFORMATION FOR 2009 SEASON

**PRESIDENT (mandatory)**

**SNEWGA REPRESENTATIVE (mandatory)**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Email address \_\_\_\_\_

Email address \_\_\_\_\_

**HANDICAP CHAIRPERSON (optional)**

**2008 CLUB CHAMPION (optional)**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Email address \_\_\_\_\_

Email address \_\_\_\_\_