



2020 NENY PGA JUNIOR TOUR MEMBERSHIP APPLICATION



Mail or email membership application and payment to: Northeastern New York PGA,
418 Consaul Road, Schenectady, NY 12304
Phone (518) 438-8645 ♦ devans@pgahq.com

Please complete the following application in its entirety. Please **PRINT** clearly to help deter any spelling mistakes on our part.

PLEASE CHECK ONE: RENEWAL NEW MEMBER

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ H.S. Graduation Year: _____ Gender: Male Female

Ethnicity: African American ___ Asian ___ Caucasian ___ East Indian ___ Hispanic/Latino ___ Middle Eastern ___ Native American ___ Pacific Islander ___ Multi Ethnic ___ Other

Address: _____

City: _____ State: _____ Zip: _____

School Attending _____ Golf Team Member Varsity J/V

H.S. Golf Coach Name: _____

Contact Cell Phone #: (____) _____ - _____

Primary Email: _____

Secondary Email: _____ Health Conditions / Allergies: _____

Club Affiliation: _____ Golf Instructor's Name: _____

Age Division (Select One): *Junior's may elect to play "up" an age division if the junior competes in their first two events and finishes within the top 75% of the field results for one of those events. Once a junior plays "up", he/she cannot elect to revert back to a lower age division as all Player of the Year Points will be lost.*

Ages 8-12 (9-holes, forward tee)

Ages 13-15 (18-holes, middle tee)

Ages 16-18 (18-holes, back tee)

Emergency Contact Name: _____ EC Cell Phone #: _____

Please note that your email address will be for NENY PGA use only. One email address is required to send out pairings, starting times, results, cancellation notices and other NENY PGA specific information. Your email is also the primary means for the NENY PGA to send you your Player's Club ID and password, which is essential for you to be able to sign up for tournaments online. Should you wish to provide a second email address, that address will be copied on all correspondence. We will not sell, reproduce or provide this information to any third-party vendors.

Parents / Guardians Name(s) (Please Print): _____

Please indicate method of payment: Cash Check Credit Card

Card Type: Visa Mastercard AmEx Discover

Card Number: _____ - _____ - _____ Exp. Date ____/____/____

Security Code (Required): _____ Name on Card: _____

Cardholder Signature: _____

Player's Signature: _____

By signing above, the player agrees to abide by the NENY PGA Code of Conduct and Assumption of Risk Policy as outlined in the NENY PGA Junior Tour Rules and Regulations and waiver of photo release for the NENY PGA Junior Golf marketing purposes

