



**River North Women's Golf Association**  
**2024 Membership Registration**  
rivernorthwomensgolfassociation.org

**Annual Dues - \$35**

New or Returning Member? (N or R)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Home Course \_\_\_\_\_

GHIN# (Required) \_\_\_\_\_ Current Handicap Index \_\_\_\_\_

By submitting this application, I permit RNWGA to use photographs taken at events and waive my right to inspect photographs in which my likeness appears. I also permit RNWGA to share my contact information with other RNWGA members and to receive text messages or emails related to RRGWA.

Signed on the \_\_\_\_\_ of \_\_\_\_\_, 2024.  
\_\_\_\_\_  
(Name)

Annual membership dues of \$35 should be paid by check payable to:  
River North Women's Golf Association (or RNWGA) and mailed to the following:

River North Women's Golf Association  
c/o Diane Voss  
1567 Lake Holcomb Ln.  
Marietta, GA 30062

**Thank you for joining River North Women's Golf Association!**