Women's Southern California Golf Association
402 W. Arrow Highway, Suite 10
San Dimas, CA 91773
(909) 592-1281 • FAX (909) 592-7542

MAINTENANCE FORM

- ☐ ADD A NEW MEMBER
- ☐ CHANGE MEMBER INFO
- ☐ DELETE MEMBER
- ☐ REINSTATE MEMBER
- ☐ PRINT DUPLICATE CARD
- ☐ TRANSFER (Complete Below)
- ☐ 18 HOLE INDEX
- ☐ 9 HOLE INDEX
- ☐ DUAL (9 & 18 Index)

HANDICAP NUMBER ___ — ___ | CHK ___ < 1st CHARACTER OF LAST NAME | CLUB NUMBER ___ — ___ | MEMBER NAME _____

LAST NAME | FIRST NAME & INITIAL

ADDRESS

CITY | STATE | ZIP CODE

AREA CODE — TELEPHONE NO. — | TYPE > | WSCGA MEMBERSHIP CODES: R=REGULAR, H=HANDICAP ONLY, J=JUNIOR, A=ASSOCIATE, S=SPECIAL | MO. DAY YR. IF JUNIOR GOLFER SHOW BIRTHDATE

FOR NEW APPLICANTS: List below dates, scores, course ratings, and slopes; or dates and differentials.
TYPE = "A" Away scores, if not leave blank
TYPE = "T" Tournament scores

IF ADDING A NEW MEMBER WHO ALREADY IS A MEMBER OF ANOTHER GOLF CLUB IN SOUTHERN CALIFORNIA, ENTER BELOW THE COMPLETE INFORMATION FOR EACH ADDITIONAL CLUB

CLUB NAME _____ HANDICAP NO. _____ ASSOCIATION NAME _____

IF ON GHIN # _____ INDEX _____

TYPE	DATE	SCORE	COURSE RATING	SLOPE	OFFICE USE ONLY	TYPE	DATE	SCORE	COURSE RATING	SLOPE	OFFICE USE ONLY

DELETE DIFFERENTIAL

TYPE	DATE M M	DATE D D	DATE Y Y	DIFFERENTIAL		

NOTE:
TO CORRECT ANY DIFFERENTIAL YOU MUST DELETE WHAT IS PRESENTLY IN THE MEMBER'S RECORD AND THEN ADD THE CORRECT DATE, SCORE, COURSE RATING, AND SLOPE.

TYPE	DATE	SCORE	COURSE RATING	SLOPE

TRANSFER INFORMATION

NAME OF WSCGA FORMER CLUB _____ CLUB # _____

AUTHORIZED BY _____ HANDICAP CHAIRMAN

DATE _____ CLUB NAME _____

HD 004 (REV. 10/98)