



# Passaconaway COUNTRY CLUB

## 2024 Passaconaway Inner Club Application

*Please Print Clearly*

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

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2023 GHIN #: \_\_\_\_\_

### **Members in the Passaconaway Inner Club will be provided with:**

- USGA Handicap membership from 4/1 - 11/15, managed by the professional staff
- Eligibility to participate in all club tournaments
- Tee time rollover privileges
- 10% discount on all regularly priced Golf Shop merchandise

I understand that the level of privilege granted to me by being an Inner Club member at Passaconaway CC may change at any time at the sole discretion of management.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Payment of \$70.00 is due with your completed application  
and no refunds are available.*