

**SUNNYVALE SENIOR SITIZEN GOLF CLUB
SSSGC**

Check one: **Renewal - Please Renew by Oct 31**
 New Member

FOR YEAR 2023 (Yearly Dues \$85)

Please Print Clearly

DATE _____

NAME _____
(Last Name) (First Name) (Middle Initial)

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

NEW MEMBER - Please Fill Out Below:

DATE OF BIRTH _____ NCGA GHIN (if you have one) _____

WIFE'S/PARTNER'S NAME _____
(Optional; Used for social events, e.g. annual dinner meeting)

How did you hear about SSSGC?

- At Sunnyvale course SSSGC.org website
 Ad in paper From Friend/Member
 Other _____

MAKE CHECK PAYABLE TO SSSGC - SEND THIS FORM AND CHECK TO:

**JUDD SMITH
1239 SARGENT DRIVE
SUNNYVALE, CA 94087**

DO NOT FILL OUT - FOR SSSGC USE:

CHECK #: _____

AMOUNT: _____

DATE: _____

USGA/GHIN ADMIN: _____

BLUE GOLF: _____

GOLF GENIUS: _____

MEMBER PLANET: _____

WELCOME LETTER: _____

CONTACTS: _____