

PAR 5 Phone: 777-7729

## PAR FIVE CLUB MEMBERSHIP APPLICATION

PAR 5 Club, P.O. Box WK 53, Warwick, WKBX

PAR 5 Executive Email Contacts: edwinford@digicel.bm		lanthia@transact.bm	antoinettemb65@gmail.com
FULL NAME:			
	Last Name	First Name	Middle Name (s)
ADDRESS:			
MAILING ADDRESS:(If different	ent from above)		
OCCUPATION:			
DATE OF BIRTH:		CONTACT NUMBERS:	Home:
	Day / Month / Year	Cell:	Work:
SHIRT SIZE: Ladies or Men	(S) (M) (L) (XL) (XXL) (XXXL	_) email:	
NEXT OF KIN:			
	Name	Contact#	Relationship
MEMBERSHIP INFO:	\$290.00	\$110.00	
	New Member □	Renewal	Other
BGA INFORMATION			
GHIN#			
CURRENT Stroke Index:	Other Family Member Name: (1)		
	Other Family Member Name: (2)		
Are you presently a Membe	er of another Golf Club? YES	/ NO If yes please specify	
Who introduced you to the	Par 5 Club?		
COMMENTS:			
I	, agree to abide by t	he Rules and Regulations provided by t	he Executive Management
of the PAR 5 Club.			
Signature:		Date:	
Official use only		REGISTRATION PERIOD	2024/2025
	CHQ#	Amount \$	
	Cash	Amount \$	PAR 5 Account: Butterfield 0601-592940-011
OFFICER SIGNATURE		DATE RECEIVED:	