

# Makalei Kolepa Hui

## Application for Membership

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Tel (cell): \_\_\_\_\_ Tel (Home): \_\_\_\_\_

Tel (business or fax): \_\_\_\_\_ Email: \_\_\_\_\_

USGA GHIN: # \_\_\_\_\_ USGA GHIN Index: \_\_\_\_\_

Location Established: \_\_\_\_\_

Sponsor (Must be in good standing): \_\_\_\_\_

The purpose of this Club is to foster and promote fellowship & competition on a regular and ongoing basis for it's members. We strive to develop and maintain a superior reputation in the golfing community which will enable us to perpetuate our love of the game with greater ease and convenience. We welcome any qualified individual who has the same sense of purpose and desires aforementioned.

If accepted as a member, I understand and agree to support Makalei Kolepa Hui and it's desires to maintain superior reputation in the golfing community. I aslo understand that there are conditions and minimum qualifications that must be met for me to contine my membership with the club as stated in it's "Rules & Regulations", and if these conditions/qualifications are not met, my membership may be terminated and/or non-renewed. I also certify that I am a full time resident of the State and County of Hawaii.

I have read and understand the above, I also agree to abide by the club's by-laws, rules, regulations, and guidelines.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Board Action:** Yes / No Date: \_\_\_\_\_

**Membership:** Yes/ No Date \_\_\_\_\_