



APPLICATION FORM FOR 2026

I hereby make application for membership in the Stationers' Golf Association and, if elected, promise to recognize the authority of all Officers and Committees and to comply with the by-laws.

(Please print clearly in all the spaces, using "none" in those that do not apply)

NAME: _____
DATE: _____
ADDRESS: _____
CITY: _____
STATE: _____
ZIP: _____
PHONE: _____
CELL PHONE: _____
E-MAIL: _____
GHIN#: _____
GOLF CLUB MEMBERSHIP: _____
PROPOSED BY: _____

Please return this form with a check made to the Stationers' Golf Association for the annual dues of \$200.00 to:

Dr. Charlie Neidorff
400 South Oyster Bay Road, Suite 206
Hicksville, NY 11801

The above application approved:

Membership Committee 2020