

BEST EVER GOLF ASSOCIATION, INC. (BEGA)

MEMBERSHIP APPLICATION

BEGA Directors:

Stephen Ellzey
George Landingham
Lance Morris
Linda Pline
Rick Rush

BEGA Officers:

President: Rick Rush
Vice President: George Landingham
Secretary/Treasurer: Stephen Ellzey
Monday League President: Blake Burden
Tuesday League President: George Landingham
Saturday League Presidents: Lance Morris, Carl Heater
Monthly Tournaments: Stephen Ellzey
Travel'n' Golf Presidents: Mike & Linda Pline
Handicap Committee:
Ladies: Stephen Ellzey
Men: Stephen Ellzey
Web Master: Rick Rush

Name: _____
Home Address*: _____
Street: _____
City, State Zip*: _____
Email Address*: _____

(Primary address where you want to receive BEGA tournament, league and other information)

Work Phone*: _____
Home Phone*: _____
Cell Phone*: _____
BEGA GSID Number: _____
USGA GHIN Number: _____
Club Where GHIN Paid: _____
Birthdate *: _____

Note: If Birthdate not provided, player must play youngest age category in tournaments.

(*Items not published to non-members)

(Do Not Write in this Section - BEGA USE ONLY)

Year: _____
Check: _____ Cash: _____
Check #: _____
Amount: _____
Membership Dues: _____
GHIN Assessment: _____
Other: _____

BEGA, Inc. (BEGA) is a United States Golf Association (USGA) and an Alabama Golf Association (AGA) licensed club. As a member you will receive a USGA handicap and have an obligation to record ALL SCORES. You can use our on-line Golf Software (GSID) handicap system or the Golf Handicap Information Network (GHIN).

BEGA Activities are located on our web site at the following location: <http://begainc.org/>

All functions are handicapped by similar skill level, beginners are welcome and handicaps will be established and maintained. Golfers desiring to participate in any BEGA monthly tournament and/or league/event must become a BEGA member. To join, complete the Membership Application form with ALL requested data; sign and send with a \$35.00 check. Make check (payable to BEGA) and send to Stephen Ellzey (see address below).

I hereby release BEGA from any liabilities in case of any physical injury or property loss to me or caused by me arising out of, or in connection with, any activities sponsored by BEGA. I will provide the BEGA secretary any changes to my information provided in this Membership Application in the manner requested by the BEGA secretary. If I do not pay BEGA dues in any year, I understand that I will be removed from the BEGA rolls. I will comply with the published BEGA bylaws and hereby certify that I have read and understand the above by signing this application.

Signature: _____

Please make all checks payable to BEGA and send to the following address:

BEGA
c/o Stephen Ellzey
2500 Millwood Circle
Huntsville, Alabama 35803

Questions should be referred to the following:

ellzey1103@comcast.net

