

# TRILOGY LA QUINTA WOMEN'S GOLF CLUB (TLQWGC) (EIGHTEEN HOLE) MEMBERSHIP FORM



**Requirements for membership:** Members must be members of TLQMA (Trilogy La Quinta Maintenance Association).

Date \_\_\_\_\_ Name \_\_\_\_\_

Significant Other's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Full Time or Part Time (please circle)  
Previous Golf Club (if applicable) OR moved from: \_\_\_\_\_

Seasonal Yes or No (please circle) Summer home city/State: \_\_\_\_\_  
Green Tees or Combo Tees (please circle) Please check, Home owner \_\_\_\_\_ Renter \_\_\_\_\_

**(Note:** All of our club communication is through e-mail. An e-mail address is needed by everyone. If you do not have a computer, you can sign up for a free e-mail address at the Santa Rosa Club to use the computers there.)

Birth date: Month \_\_\_\_\_ Day \_\_\_\_\_ Existing GHIN Number: \_\_\_\_\_  
Name and Member Number of other organization (other than GHIN): \_\_\_\_\_

**Our Club year is January 1 thru December 31 (annual membership including SCGA Membership and the Hole in One fund is \$110). Join Nov 1, for immediate membership with your next year's dues and participate in the early season events!!**

Please mail or telephone and hand deliver this form along with a check payable to TLQWGC to:  
Holly Sharps, Membership Chair  
61216 Topaz Dr.  
760-333-4513 (cell)  
[hollysharps@yahoo.com](mailto:hollysharps@yahoo.com)

THANK YOU!