

Even if you are a past member please fill all the spaces including the e-mail space.

membership application

Print name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business/Cell Phone: _____

D.O.B. (must be 50+, proof of age may be required): _____

Email Address: _____

Signature: _____

- Check here to have your name entered on the substitute page
- Check here for Youth Golf Fund (Separate Check: Mark Payable to NENSGA Youth Golf Fund In memo area)
Youth Fund \$ _____ amount



Dues are \$15 per year. Make check payable to NENSGA.
Return to: NENSGA, 86786 573rd Ave., Laurel, NE 68745.

Thank you and welcome to the NENSGA!
Dues are non-refundable

..... detach and give to a friend

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