

MARYLAND INTERCLUB SENIOR GOLF ASSOCIATION
2017 BEAVER CREEK SENIOR GOLF
MEMBERSHIP APPLICATION

Your committee is in the process of organizing the MISGA program for 2017. We have scheduled home mixers at Beaver Creek with return mixers away. We have two (2) intra-club events at the beginning of the season. A 36-hole 2-day championship will be held at the end of the season.

There will be a membership meeting at the Beaver Creek Clubhouse on **TUESDAY MARCH 21 at 8:30 am.** All Beaver Creek members **50 years** of age and older are eligible to join the association. If you have a friend that might like to become a member, bring **them** along. Coffee and donuts will be available. **Non-MISGA golf will follow at approximately 9:30. No Lunch will be served.**

MISGA play begins on March 28 with a member scramble. A sign-up sheet will be on the MISGA Bulletin Board in mid March. The MISGA membership fee of \$30.00 for the year is due and payable now. This fee includes the cost of the State association dues, the end of season annual banquet, and funds for miscellaneous expenses. Detach the form at the bottom of this sheet and include with your check, made payable to **"BEAVER CREEK SENIOR GOLF"**, and mail to Lee Iseminger, as indicated.

Beaver Creek Country Club will be handling required handicap records on their computer again this year. There is a \$40 fee for this service, which must be paid to the PRO SHOP prior to our first scheduled event. The fee for each home mixer will be \$40.00. We believe that the fees for the away mixers will be approximately \$40-\$50. The home clubs control these fees.

SEE YOU ON MARCH 21 -- BRING A FRIEND!!!

Curtis Kendall - Representative **Terry Gossard - Asst. Representative**
Telephone: 301-676-5145 Telephone: 301-745-4320

COMMITTEE

Carmen Dattilio, Dick Moser, Dave Ambrose, Terry Burket, Lee Iseminger

DETACH AND RETURN WITH PAYMENT

Make \$30.00 check payable to **"Beaver Creek Senior Golf"**

Name _____ Telephone # _____
Street/P.O. Box _____
City _____ State _____ Zip Code _____

Handicap Computer No. _____ **Email Address** _____

Date of Birth _____ **Email Address needed for communication**

MAIL TO: LEE ISEMINGER
P. O. BOX 251
Funkstown, MD, 21734
Telephone: 301-791-0462

If you play at Beaver Creek from the the forward
tees, please indicate so by marking an "X" below.
_____ **Yes**, I play from the forward(Black) tees.

Info will be used for away matches w/ forward tees