

**WISCONSIN STATE GOLF ASSOCIATION, INC.**

P.O. Box 35 - Elm Grove, WI 53122

MEMBERSHIP APPLICATION

(414) 443-3560 Fax (414) 443-0817

CLUB \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

Fax ( ) \_\_\_\_\_ WEB SITE ADDRESS \_\_\_\_\_ E-MAILADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS (If Different) \_\_\_\_\_

YEAR ORGANIZED \_\_\_\_\_ NO. OF MEMBERS \_\_\_\_\_

TYPE OF CLUB/COURSE: Course Without Real Estate \_\_\_\_\_

**BY-LAWS: ARTICLE III – MEMBERSHIP**

**Section 1.** Members of this association shall be comprised of golf clubs and golf courses located in the State of Wisconsin.

**Section 2.** Membership in this association shall be open to any organized golf club or golf course located in the State of Wisconsin or any organized golf club or golf course approved for membership by the Board of Directors. An organized golf club is comprised of members who manage their own affairs through officers and/or a Board of Directors whom they elect and have committees appointed to manage golf activities. Such golf club does not necessarily control the course where it plays. An organized golf club must have a minimum of twenty-five individual members. Each member club or course is expected to host tournaments and events sponsored by the WSGA on a reasonable rotating basis and under mutually agreeable terms and conditions.

**Section 3. Failure on the part of any member club or member golf course to use the Individual Golfer’s Service, which includes the WSGA handicap service provided by the association for all its active member golfers, shall automatically terminate membership in this association.** Termination of membership for such cause shall be effective upon written notice thereof by the Board of Directors. Annual fees for association services, including the individual golfer’s service for participating members, shall be established by the Board/Directors.

**Section 4.** An applicant for membership in this association shall be elected to membership by a three-fourths vote and **ALL** members of the Board of Directors present at any regular or special meeting of the Board of Directors duly called and held. The decision of the Board of Directors upon any application shall be final and binding upon the applicant and there shall be no recourse of appeal from the decision of the Board of Directors.

**OFFICERS – NAME, ADDRESS & PHONE NUMBER(Business)**

PRESIDENT: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

VICE PRES: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

SECRETARY: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

TREASURER: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

DIRECTORS: \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

\_\_\_\_\_ PHONE ( ) \_\_\_\_\_

\_\_\_\_\_ PHONE ( ) \_\_\_\_\_

\_\_\_\_\_ PHONE ( ) \_\_\_\_\_

\_\_\_\_\_ PHONE ( ) \_\_\_\_\_

Authorized Signature (one required)

PRESIDENT \_\_\_\_\_ SEC/TREAS \_\_\_\_\_

Accepted Date \_\_\_\_\_ WSGA Signature \_\_\_\_\_

PLEASE ENCLOSE YOUR CHECK FOR **\$50.00** TO COVER MEMBERSHIP DUES