



# 2021 CAGD Membership

January 1 – December 31, 2021

## COVER FORM

Club Name: \_\_\_\_\_

CAGD Members \_\_\_\_\_

X \$8.00 each = \_\_\_\_\_

Make check payable to CAGD

### MEMBERSHIP SUBMISSION DUE NO LATER THAN FEB 1, 2020

Be sure to include the following pages

- Cover Form (this page)
- CAGD REP contact information
- Alphabetized list with name, GHIN#, phone # and LEGIBLE email addresses

Mail check and above forms to the CAGD Membership Chair

Linda Thompson  
15719 W Edgemont Ave  
Goodyear, AZ 85395

**Thank you for being a representative for your club. You play an important role in making Central Arizona Golf District a success.**



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January 1 – December 31, 2021

## REP FORM

Please complete this form and mail to Membership Chair, even if you do not have any changes from last year.

**Rep Name:**

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Address:

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City:

Zip

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Email:

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Phone:

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**Alternate Rep:**

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Address:

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City:

Zip

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Email:

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Phone:

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Name/address of check payee for Blind Draw payouts:

**Name:**

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Address:

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City:

Zip

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Email:

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Phone:

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