

# Minnechaug Golf Course

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## GHIN Application

Full Name:

\_\_\_\_\_

*First* *Last* *M.I.*

Address:

\_\_\_\_\_

*Street Address* *Apartment/Unit #*

\_\_\_\_\_

*City* *State* *ZIP Code*

*Phone:* \_\_\_\_\_ *Cell:* \_\_\_\_\_

*Email:* \_\_\_\_\_

GHIN #: \_\_\_\_\_ DATE ACTIVE: \_\_\_\_\_

Paid in Full: \_\_\_\_\_ (Date) \_\_\_\_\_

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Minnechaug