



# ASGCA MEMBERSHIP APPLICATION

# Representative Project Form 1

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

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Client Name:

Contact Phone:

Contact email:

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Project Type:

- Public / Daily Fee
- Private / Semi-Private
- Resort
- Military

Additional Description:

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

- New Holes
- Fully Remodeled/Rebuilt Holes
- Partially Remodeled Holes

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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ASGCA MEMBERSHIP APPLICATION

Representative Project Form 2

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

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Client Name:

Contact Phone:

Contact email:

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Project Type:

- Public / Daily Fee
- Private / Semi-Private
- Resort
- Military

Additional Description:

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

- New Holes
- Fully Remodeled/Rebuilt

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

- Holes
  - Partially Remodeled Holes
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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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# ASGCA MEMBERSHIP APPLICATION

## Representative Project Form 3

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

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Client Name:

Contact Phone:

Contact email:

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Project Type:

Public / Daily Fee

Additional Description:

Private / Semi-Private

Resort

Military

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

New Holes

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

Fully Remodeled/Rebuilt Holes

Partially Remodeled Holes

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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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ASGCA MEMBERSHIP APPLICATION

Representative Project Form 4

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

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Client Name:

Contact Phone:

Contact email:

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Project Type:

Public / Daily Fee

Additional Description:

Private / Semi-Private

Resort

Military

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

New Holes

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

Fully Remodeled/Rebuilt Holes

Partially Remodeled Holes

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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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ASGCA MEMBERSHIP APPLICATION

Representative Project Form 5

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

---

Client Name:

Contact Phone:

Contact email:

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Project Type:

- Public / Daily Fee
- Private / Semi-Private
- Resort
- Military

Additional Description:

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

- New Holes
- Fully Remodeled/Rebuilt Holes
- Partially Remodeled Holes

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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# ASGCA MEMBERSHIP APPLICATION

# Representative Project Form 6

Please submit a separate "Representative Project Form" for each project.

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Project Name:

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Location:

---

Client Name:

Contact Phone:

Contact email:

---

Project Type:

Public / Daily Fee

Additional Description:

Private / Semi-Private

Resort

Military

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Number of Holes: \_\_\_\_\_ Date Opened: \_\_\_\_\_

New Holes

Yardage: \_\_\_\_\_ Par: \_\_\_\_\_

Fully Remodeled/Rebuilt Holes

Partially Remodeled Holes

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If partially remodeled, or an alternative or practice facility, please describe the extent of the work:

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Describe the extent of routing you performed:

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Golf Course Builder

Contact Phone:

Contact Email:

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