



FLWGA Membership Application

Mail your completed application and check payable to FLWGA to: FLWGA Membership Director
1166 Carrington Greens Drive
Frisco TX 75036

You may also drop in the box at same address.

Questions: contact Karren Herron (Membership Director): flwga.membership@gmail.com

Member Information:

First Name: _____ Last Name: _____

Email: _____

Street: _____

Home Phone: _____ Cell Phone: _____

If the date you are joining is between **January 1st and August 31st** please check the appropriate box:

Golf and Social Membership Jan thru Dec \$ 55

Social Membership ONLY Jan thru Dec \$ 40

If the date you are joining is between **September 1st and December 31st** please check the appropriate box:

Golf and Social Membership Sept thru Dec \$ 30

Social Membership ONLY Sept thru Dec \$ 25

Hole in One Club \$5

Check #: _____