



*Central Texas Players Golf Association  
P.O. Box 11525  
Killeen, Texas 76547-1525*

*Application for Membership*

Name \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

E-mail address \_\_\_\_\_

Handicap (if known) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you willing to participate in the club various sub-committees? If so, check one or more committees listed.

Tournament Committee \_\_\_\_\_

Community Service Committee \_\_\_\_\_

Membership Committee \_\_\_\_\_

Scholarship Committee \_\_\_\_\_

Upon approval of my membership application, I will agree to abide by the Bylaws and Constitution, which governs the Club's body.

Please sign and return this application along with \$100.00 (Do not mail cash) to the address shown above or bring to meeting date at address listed below.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: Meetings held on 2<sup>nd</sup> Thursday of each month at 1800 hrs (6:00PM)  
DAV 29, 607 E. Veterans Memorial Blvd, Harker Heights, TX 76548 Contact:  
706-464-5987, Marcus Lane - Membership Chairman  
or 254-289-1084, Larry Holly - President  
[www.ctpga.org](http://www.ctpga.org)**