



Packet # \_\_\_\_\_

Date \_\_\_\_\_

# 2026 Players Club Application

START  
SAVING  
TODAY

Renew ☐ **\$199**      New ☐ **\$249**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Please Print clearly

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip \_\_\_\_\_

ADD A 2026 SCGA INDEX FOR **\$41**

Please circle one

YES      NO

Date of Birth \_\_\_\_\_

Renewal  
Ghin# \_\_\_\_\_

New  
Ghin# \_\_\_\_\_

Other or Expired# \_\_\_\_\_