THE Ole Miss GOLF COURSE

GHIN Handicap Program
2025 Membership Form

Office Use Only		
Payment Complete:	Yes	No
Staff Initials:		

Name:		
Mailing Address:		
City:	State:	Zip:
Phone:	Email:	

Please check the appropriate box to the questions below:	**Yes**	**No**
Are you a current member of The Ole Miss Golf Course? If yes, please provide member #: _____		
Have you had a GHIN #? If yes, please provide the following info:		
GHIN #: _____ Club Name: _____ City: _____ State: _____		

The GHIN handicap program is an optional annual membership (exp. 12/31/25). Dues are $35 annually. **Please provide annual payment prior to GHIN activation. This fee is waived for current annual OMGC members.**

Signature: _____ Date: _____

Payment (circle one): Cash Check Credit Card