

Membership Rebate Form

Name: _____

Ghin #: _____ 2nd Ghin #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Home Club Name: _____ Club #: _____

Multi Club Name(s):	Club #
1. _____	#: _____
2. _____	#: _____
3. _____	#: _____
4. _____	#: _____
5. _____	#: _____

Please print out and mail to:
PWGA
Attn: Destra Amado
3101 Sunset Blvd. Suite 1E
Rocklin, CA 95677

Please allow 4-6 weeks after *Club Billing Cycle* to receive your rebate. Your rebate will not be processed until your club has paid their dues. If you have any questions or need further information, call us at 800-995-PWGA (7942) or 916-315-8304.

PWGA Office Use Only

Ghin Date: _____ Date Sent: _____ By: _____