



2008 National Golf Tour Membership Application

Professional Membership – Open Flight: \$350.00
Amateur Membership – Open Flight: \$175.00
Handicap Flight Membership: \$175.00

(Please print or type neatly)

PLAYER INFORMATION

Name: _____ Social Security # _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact Person: _____ Phone: _____

Playing Status: (Circle One) Professional – Open Flight Amateur – Open Flight Handicap Flight

Home Series: (Circle One) Badger Series – Wisconsin, Desert Series - Arizona, Lone Star Series – North Texas,
Peachtree Series – Georgia, Piedmont Series – Carolinas, South Coast Series – Southern California

Player Bio Information –Please fill out completely as it will be posted on the NGT website

College attended: _____ Year Graduated: _____ Year Turned Pro: _____

Other Tours Played On: _____

Major Golf Accomplishments: _____

IN YOUR BAG

Driver: _____

Woods: _____

Irons: _____

Putter: _____

Ball: _____



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METHOD OF PAYMENT

Check # _____ MasterCard / Visa / American Express / Discover * _____
(Circle One) (Card Number)

(Expiration Date) CVN # 3 digit # on back of card

*Note: There is a 3% handling charge for all Credit Card transactions.

*If credit card billing information is different from the above information, Please advise.

Remit and make checks payable to:

National Golf Tour
16238 Hwy 620, Suite F-246
Austin, Texas 78717
Phone: 214.460.9917
Fax: 877.242.5681

MEDIA FORM AND PLAYER AGREEMENT

I HEREBY GRANT THE NGT THE RIGHT TO ANY PERSONAL OR HISTORICAL INFORMATION HEREIN FOR MEDIA AND PUBLIC RELATIONS USE. I AGREE TO COMPLY WITH THE POLICIES AND GUIDELINES SET FORTH BY THE NGT. I UNDERSTAND THAT AS A MEMBER OR PLAYER, I AM AN INDEPENDENT CONTRACTOR, AND NOT AN EMPLOYEE OF THE NGT. AS AN INDEPENDENT CONTRACTOR, I AM RESPONSIBLE FOR MY OWN PERSONAL LIABILITY INSURANCE. I AGREE TO HOLD HARMLESS THE NGT AND ITS SPONSORS FROM RESPONSIBILITY FOR ANY INJURY, DAMAGES, AND/OR MEDICAL EXPENSES INCURRED BY ME, ON OR OFF THE GOLF COURSE, DURING MY INVOLVEMENT WITH THE TOUR.

Signature: _____ Date: _____

www.NationalGolfTour.com