



## KGA COMMITTEE PERSON APPLICATION

NAME: \_\_\_\_\_

HOME MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SPOUSE'S NAME: \_\_\_\_\_

BEST WAY TO CONTACT YOU:      EMAIL      or      POST MAIL

SEND KGA CORRESPONDENCE TO:      HOME      or      BUSINESS

### BUSINESS AFFILIATIONS:

1. \_\_\_\_\_ TITLE: \_\_\_\_\_

YEARS AT THIS BUSINESS: \_\_\_\_\_

2. \_\_\_\_\_ TITLE: \_\_\_\_\_

YEARS AT THIS BUSINESS: \_\_\_\_\_

### GOLF CLUB AFFILIATIONS:

HOME: \_\_\_\_\_ YEARS: \_\_\_\_\_

OTHER: \_\_\_\_\_ YEARS: \_\_\_\_\_

OTHER: \_\_\_\_\_ YEARS: \_\_\_\_\_

### OFFICES OR COMMITTEES SERVED AT CLUB LEVEL:

1. \_\_\_\_\_ YEARS: \_\_\_\_\_

2. \_\_\_\_\_ YEARS: \_\_\_\_\_

**AREAS OF INTEREST IN KGA OR ITS PROGRAMS:**

- COURSE RATING \_\_\_\_\_
- TOURNAMENT ADMINISTRATION \_\_\_\_\_
- JUNIOR GOLF: GENERAL \_\_\_\_\_ SECTION CHAIRPERSON \_\_\_\_\_
- OTHER: \_\_\_\_\_

**Please return via fax or mail to the Kansas Golf Association:**

**1201 Wakarusa Drive, Suite B5  
Lawrence, KS 66047  
(785) 842-4833  
Fax: (785) 842-3831  
[kga@kansasgolf.org](mailto:kga@kansasgolf.org)  
[www.kansasgolf.org](http://www.kansasgolf.org)**