2027 WMGA Independent Membership Application

Name:	
Address:	
City, State, Zip:	
Home Phone:	
Cell Phone:	
Email:	
USGA GHIN # **AND** Current Handicap Index:	
Approximate # of rounds played in 2026:	
Birth Date: (required for Junior and Senior events)	
Occupation:	
Are you a dues paying member at a golf course? If yes, what facility?	
How did you learn about the WMGA Independent Membership?	
Why would you like to be an Independent Member?	
If living in Manhattan, select district affiliation: (Choose one: LI, NJ, WCT)	

Independent Membership is subject to annual review by the Membership Committee.

Annual Dues are $300; check payable to the WMGA.
Please mail your check and Independent Membership Application Form to WMGA, 49 Knollwood Road, Elmsford, NY 10523. Payment by Zelle to: treasurer@wmga.com

Call the WMGA office, (914) 592-7888, for additional information.