

BACK NINE CLUB MEMBERSHIP
2010 DUES

NAME: _____

ADDRESS: _____

_____ ZIP CODE _____

TELEPHONE: _____

EMAIL ADDRESS: _____

Handicap _____ Course: _____

DUES: \$35.00 Per Person w/Back Nine Club Handicap

PLEASE MAIL CHECK PAYABLE TO: HHTC MAIL TO: DONNA FOISY
253 IRVINGTON STREET
NEW BEDFORD, MA 02745