2025 PCGC Men's Club a	applicati	ion Go	lfer Inform	ation
First & Last				
Handicap Index				
Mobile Phone				
Street Number and Name				
City, State, Zip				
Email				
League Selection (circle answers))			
Will you be playing in the Thursday Men's Lo	eague	Yes	No	
If YES, do you have a partner?	Yes	SAME a	as last season	
	Yes	NEW fo	or this season	
If NO -	No	Please Pair me up with someone		
If yes, list partner name (First and Last)				
Preferred Flight Start Time	1:00	3:15	4:45	No Preference
Are you a Gold Tee Golfer		Yes	No	
Will you be playing in the Tuesday Morning	Events	Yes	No	

Payment Information (circle payments you are making)				
Thursday Night League – Myself		\$30		
Thursday Night League - Partner		\$30		
Men's Club Dues - Myself		\$125		
Men's Club Dues - Partner		\$125		
Hole-in-One Club	\$10			
Tuesday Morning Entry Fee	\$5			
Paymen	t Total			

Form of Payment	
Check via mail (Note check number)	Check #
Check - Other arrangements (note on reverse)	
Cash - No USPS (note on reverse)	

Mail Payment To:

Mike Vaccaro

55 Belmont Ave Buffalo, NY 14223-1926

RE: Please put "PCGC \mathbf{MC} " on front lower left corner of envelope