

**TIRETOWN GOLF CLUB  
MEMBERSHIP APPLICATION**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**E-Mail** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Number** \_\_\_\_\_

---

**What is your handicap or skill level** \_\_\_\_\_

**How often do you play?** \_\_\_\_\_

**What leagues do you play in?** \_\_\_\_\_

**How did you find out about Tiretown?** \_\_\_\_\_

**Send inquires to:**     **Tiretown Golf Club**  
                                 **P. O. Box 562**  
                                 **Akron, OH 44309**

Visit our website at [www.tiretowngolfclub.net](http://www.tiretowngolfclub.net)

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_