GAM UP Public Club Membership Application

Club Name: ____________________________________________________________

Club Address: ____________________________________________________________________

Club Mailing Address (if different): ___________________________________________________

Club Email Address:_________________________  2nd Club Email:_________________________

Main Club Phone Number:___________________  Pro Shop Phone:_________________________

Superintendent Phone:_____________________  First Tee Phone:_______________________

Business / Accountant Phone: ________________  Fax: _______________________________

Web Site Address: __________________________  Facebook: ____________________________

Twitter: __________________________________  Instagram: __________________________

Number of Holes: _________  Architect:__________________________________________

Year Founded: ____________  Do you need a Course Rating/re-rate: __Yes   __No

Do you want your club set up so its members can pay their GAM fee online via www.gam.org? 
____Yes  ____No

Will you have a computer available for score-posting in your clubhouse? __ Yes __No

Is walking permitted? ___ Yes ___No

Staff Information - Please provide name and email address:

Club Owner (s): _________________________________________________________________

General Manager: _______________________________________________________________

Director of Golf: _________________________________________________________________

Pro Shop Manager: _______________________________________________________________

Head Golf Professional: ___________________________________________________________

Superintendent: _________________________________________________________________

Business Manager/Accountant: _____________________________________________________

Handicap Chair: _________________________________________________________________

GAM Club Rep:   ________________________________________________________________

39255 Country Club Dr. B40, Farmington Hills, MI 48331 * Phone 248-478-9242 
Fax 248-478-5536 Email: membership@gam.org  Website: www.gam.org
Terms of GAM Membership

1. Complete this form fully and submit to membership@gam.org.

2. GAM annual club dues are $100.

3. Applicants who require a Course Rating or re-rate will be evaluated on club member history, location and date of last course rate. If an applicant requires a course rating or re-rating, they must pay for two years membership up front ($200). In addition, a nominal fee to cover the Course Rating expense will apply. This will be determined by the GAM based on the number of holes and tees to be rated.

4. Clubs with a consistent history of GAM membership receive a free Course Rating every 10 years.

5. The GAM charges UP member clubs $14 per person for GAM membership, which includes Handicap Services. The suggested retail for UP GAM membership is $24. GAM member clubs are authorized retailers of GAM memberships. Clubs may collect payments for individual GAM memberships or direct golfers to www.gam.org.

6. Junior members are free and clubs are not charged for them as long as their correct birth date is entered into their profile. Junior members are defined by GAM as golfers age 6-18.

7. GAM member public clubs are billed twice annually. The first billing is based on the roster of active GAM members on July 15th; the second is on August 30th and will take into account any additions to the roster that have taken place since the July 15th billing. Rebate checks are mailed to qualifying clubs beginning on October 31st.

8. GAM annual club dues may be paid by check or by credit card.

9. Failure to pay dues within 30 days of the invoice date could result in inactivation of a club’s Handicap System.

10. GAM member clubs must use the software provided by GAM to compute Handicap Indexes. Clubs may not run a separate handicap system from the GAM’s system for the computation of Official Handicap Indexes.

I agree to the above terms of club membership with the Golf Association of Michigan

Signature ____________________________________________________
Print name ____________________________________________________
Title _________________________________ Date __________________________