



TM

## The Knicker National Argyle Champions Tour Membership Application

<b>Name</b>	
<b>Address</b>	
<b>City, State</b>	
<b>Zip code</b>	
<b>Home Phone</b>	
<b>Work Phone</b>	
<b>Cell Phone</b>	
<b>Email Address</b>	
<b>Referred by:</b>	
<b>Golf Skill Level</b>	
<b>Golf Handicap</b>	
<b>Company Name</b>	
<b>Occupation</b>	
<b>Preferred Chapter Affiliation?</b>	
<b>Joining an Existing Chapter?</b>	

**Application Fee: \$30**

**Make Check payable to: The KnickNAC Tour**  
**Send Application and Check to:**  
**The KnickNAC Tour**  
**ATTN: Bill Holtry, Commissioner**  
**8205 Dustin Rd.**  
**Galena, OH 43021**

**Note: Your official membership card and list of benefits will be released to you within 4 weeks  
By signing below, you agree to abide by the rules of the KnickNAC Tour outlined in the "rules link".**

**RULES OF THE KnickNAC Tour**

**As a member, you also agree to permit the KnickNAC Tour to use any photographs taken for the  
Website or for any promotional materials.**

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Signature

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Date