

WESTFIELD GC "NEW MEMBER GRAB" PROMOTION FORM 2019

2018 Member/Season Pass Holder:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

NEW MEMBER/SEASON PASS HOLDER:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

NEW MEMBER/SEASON PASS HOLDER:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Classification: Family Couple Single Young Adult Student Junior

PLEASE RETURN THE FORM TO THE WESTFIELD GC PROSHOP IN ORDER TO GET THE DISCOUNT.