SOUTH CAROLINA COASTAL SENIORS Return to Mark Shanley, SCCS Membership Director 107 Nutmeg Way, Summerville, SC 29485

2024/2025 SCCS MEMBERSHIP APPLICATION

Endorsed by:	Please type or print clearly			Date		
FIRST NAME OR NICKNAME WIFE'S NAME ADDRESS OATE OF BIRTH (Street # / Unit #) . (City / Town) City Code) E-MAIL ADDRESS @ PHONE () . Member must be a male amateur golfer, aged fifty years or older, and a current member of a golf club located with the SCCS geographical area of operation (from Hilton Head to the City of Charleston/Mt. Pleasant and west to the C of Orangeburg), that is approved and designated by the SCCS Board of Directors. HOME COURSE CHTY HANDICAP INFORMATION: GHIN # SCGA/USGA Handicap Index Slope Current Home Course Handicap Specify BACK (Men's Regular, approx. 6,000 yards) Tee MIDDLE (Men's Senior, approx 5,500 yards) Preference FORWARD (Men's Super Senior, approx 5,000 yards) (Must check one) (Must check one) Applicant must include a handicap established at your home course using the SCGA/USGA handicap system. Aft playing in a SCCS tournament, you will be assigned a South Carolina Coastal Seniors handicap for all futu tournament play. (Applicant Signature) (Applicant Signature) Application MUST be recommended by two active SCCS Members and/or one SCCS member and the club pro. Recommended by: (Signature) (Print Last						
ADDRESS	(First		(MI)	(Last)		
(Street # / Unit #)	FIRST NAME OR NICI	KNAME		WIFE'S NAME		
				DATE OF BIRTH		
(City / Town) (Zip Code) E-MAIL ADDRESS @ PHONE () Member must be a male amateur golfer, aged fifty years or older, and a current member of a golf club located with the SCCS geographical area of operation (from Hilton Head to the City of Charleston/Mt. Pleasant and west to the C of Orangeburg), that is approved and designated by the SCCS Board of Directors. HOME COURSE	(Stree	et # / Unit #)				
E-MAIL ADDRESS				, South Carolina		
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Specify BACK (Men's Regular, approx. 6,000 yards)	of Orangeburg), that is HOME COURSE	is approved and de	esignated by the SCCS	Board of Directors.		
Tee MIDDLE (Men's Senior, approx. 5,500 yards)		Slope	Cu	rrent Home Course Handicap		
tournament play. (Applicant Signature) Application <u>MUST</u> be recommended by two active SCCS Members and/or one SCCS member and the club pro. Recommended by: (Signature) (Print Last Name) (Home Course) Endorsed by: (Description of the second of the sec	Tee Preference Applicant must inclu	MIDDLE FORWARD de a handicap est	(Men's Senior, appr (Men's Super Senior ablished at your home	ox. 5,500 yards) r, approx 5,000 yards) (Must e course using the SCGA/USGA	handicap system. After	
Application MUST be recommended by two active SCCS Members and/or one SCCS member and the club pro. Recommended by:		tournament, you	will be assigned a S	outin Caronnia Coastar Semors	hanulcap for an future	
Recommended by:			(Applicant Signa	ture)		
(Signature) (Print Last Name) (Home Course) Endorsed by:	Application <u>MUS</u>	<u>T</u> be recommende	d by two active SCCS I	Members and/or one SCCS memb	per and the club pro.	
(Signature) (Print Last Name) (Home Course) Endorsed by:	Recommended by:					
	• • <u> </u>	(Signature)		(Print Last Name)	(Home Course)	
	Endorsed by:					
		(Signature)		(Print Last Name)	(Home Course)	

Mail your completed application to the address in the letterhead, ATTENTION MEMBERSHIP DIRECTOR. Do not send money with the application.