



Carolinas GHIN Support



USGA TM-Club Registration Form

Club Name: _____

TM-Club Customer Manager 1

First Name: _____

Last Name: _____

e-Mail Address: (please use all caps)

TM-Club Customer Manager 2

First Name: _____

Last Name: _____

e-Mail Address: (please use all caps)

Association Use:

Club Number: _____ Club Password: _____

Date Rec'd: _____ Date Processed: _____ Initials: _____