



309 Laurel Lane West Kingston, RI 02892
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Email: proshop@laurellanecountryclub.com

USGA GHIN Application – 2024

Fee: \$55.00

Name: (Please Print) _____

Address: _____

City, State: _____ **Zip:** _____

Home Telephone: _____ **Work Telephone:** _____

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(When paying by check or money order. Please make checks payable to: Laurel Lane Country Club and return to the Pro Shop or via mail to 309 Laurel Lane, West Kingston, RI 02892)

Please Charge my Credit Card: ☐ **Visa** ☐ **Mastercard** ☐ **American Express**

Name on Card: _____

Card Number: _____ **Expiration Date:** _____

Signature: _____ **(For This Purchase Only)**

Amount to Charge Card: _____ **CVC:** _____