



PGA

Southern California Section

Board of Director Application

Name _____ PGA Membership # _____

PGA Member Classification _____ Chapter Affiliation _____

Home Address _____ City _____ State _____

Zip _____ Home Phone _____ Spouse Name _____

Facility or Business Name _____

Address _____ City _____ State _____

Zip _____ Work Phone _____ Fax _____

Email address _____

Mobile phone _____

Committees you would like to participate: _____

Why are those Committees important to you: _____

I have read and understand the job Responsibilities and Expectations and have the ability and time to perform all of the essential duties.

Signature _____ Date _____

***Please attach a bio/statement of intent, maximum 200 words to include in our SCPGA publications as to why you would like to serve on the Board of Directors and what your goals are for your three year term for the Southern California PGA. Also include a high resolution head and shoulder photograph of yourself for publication.**