

# GHIN Handicap Form



**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Check one:**

I have a GHIN number and want to keep it

GHIN Number \_\_\_\_\_

I do not have a GHIN number and need one issued

PPGA Handicap fee is \$50 per handicap.

Please make checks payable to "PPGA" and mail to:

PPGA  
PO Box 882  
Oaks, PA 19456

Please e-mail any questions to [pats@phillypublinks.com](mailto:pats@phillypublinks.com).