



PGA

PGA Recognized Golf Course

PLEASE ANSWER ALL QUESTIONS TO AVOID ANY DELAY IN THE PROCESSING OF THIS FORM.

FILL IN THE INFORMATION BELOW

FACILITY NAME _____

FACILITY MAILING ADDRESS _____

CITY/STATE/ZIP _____

FACILITY PHYSICAL ADDRESS _____

CITY/STATE/ZIP _____

COUNTY _____

SECTION _____ CHAPTER _____

FACILITY PHONE (_____) _____ GOLF SHOP PHONE (_____) _____

FACILITY FAX (_____) _____ GOLF SHOP FAX (_____) _____

WEB ADDRESS OF GOLF COURSE <http://www>. _____

FACILITY (E) EXECUTIVE (F) FOREIGN (P) PAR 3 (R) REGULATION
 (U) UNDER CONSTRUCTION

MARKETING (D) REAL ESTATE DEVELOPMENT (I) INDUSTRIAL (M) MILITARY (R) RESORT
 (Z) RESORT/REAL ESTATE DEVELOPMENT

OPERATION (E) PRIVATE EQUITY (N) PRIVATE NON-EQUITY (S) DAILY FEE/SEMI PRIVATE
 (G) MUNICIPAL

NATIONAL USE ONLY

Facility # _____ Date Input _____

Type _____ (FA) Facility Input by _____



1. Is the Golf Course (U) Under Construction? YES NO
If yes, what is the scheduled date of completion? _____
2. Number of Holes? (Minimum of nine (9) holes required) _____
3. Is the Golf Course fully equipped to teach golf? YES NO
4. Is the Golf Course fully equipped to demonstrate the use of all types of golf equipment? YES NO
5. Does each hole have a minimum hole length of 60 yards? YES NO
6. Does the course have a total yardage of not less than 1,000 yards for nine (9) holes or 1,500 for 18 holes? YES NO
7. Does the Golf Course have at least 14 acres in total course area (exclusive of the clubhouse, golf shop and parking areas)? YES NO
8. Is the 14 acres entirely planted in grass (except for artificial mats)? YES NO
9. Does the Golf Course include a golf shop adequate for the display and sale of golf equipment and apparel? YES NO

This form needs to be returned to your Section Office for processing.

By signing this form I understand that "PGA Recognized" can not be used in any promotional, media or advertising materials.

PRINT NAME OF APPLICANT _____

SIGNATURE OF APPLICANT _____ DATE _____

SIGNATURE OF SECTION OFFICIAL _____ DATE _____

SIGNATURE OF NATIONAL OFFICIAL _____ DATE _____