

Arizona Women's Golf Association

Volunteer Interest Form

Name _____ Telephone _____

Address _____

E-mail* _____ AWGA Member _____ years

I am currently an AWGA member at (clubs) _____

How many months do you live in AZ a year? _____

* E-mail is our primary form of communications.

I am interested in the following AWGA Committees: (check all that apply)
 For Committee descriptions please visit www.awga.org/who-we-are/44-committees-of-the-AWGA.asp

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Communications | <input type="checkbox"/> Course Rating | <input type="checkbox"/> Document Control | <input type="checkbox"/> Education & Training |
| <input type="checkbox"/> Financial Advisory | <input type="checkbox"/> Handicap | <input type="checkbox"/> History | <input type="checkbox"/> Junior Golf |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Public Relations | <input type="checkbox"/> Rules | <input type="checkbox"/> Sponsorship |
| <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Tournament | <input type="checkbox"/> Volunteer Development | |

Qualifications and Experience (attach additional information if needed)

1. Previous Volunteer Experience _____
2. Education _____
3. Business Background _____
4. Other Interests _____
5. Where did you get this form: (check all that apply)
 Online Friend Committee Chair AWGA Event Other

Please tell us your experience and interests
 (Check all that apply)

E = Experience

I = Interests

E	I	Computers
		I.T.
		Software
		Web Page
		Word Processing

E	I	Communications
		Human Resources
		Public Relations
		Magazine/Articles
		Marketing/Sales
		Research
		Writing

E	I	Leadership
		Business Planning
		Coaching
		Innovation
		Problem Solving

E	I	Golf Operations
		Handicaps
		Course Rating
		Rules
		Tournaments

E	I	Finance
		Accounting
		Budgeting

Send or Fax To:
 Arizona Women's Golf Association
 141 E. Palm Ln. #210
 Phoenix, AZ 85004
 Fax (602) 253-6210

Signature _____ Date _____