



WOMEN'S WESTERN GOLF ASSOCIATION DIRECTOR CANDIDATE APPLICATION FORM

Please fill out this form and return to the sponsoring WWGA Director who will submit your nomination materials.

Date: _____

Candidate Profile

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Club: _____

Club Address: _____

Tournament Golf Experience

What is your experience with tournament golf?

Tell us how your talents and interest can be of benefit to the WWGA. Are there areas of golf or tournaments that you want to learn more about?

Please list any special golf interests (rules, tournament administration, merchandising, etc.)

If applicable, please describe any past experiences with the WWGA.

Professional Experience

Please describe your past (and present) professional work experience.

Please share any other volunteer activities in which you participate.

Personal Details

What is your general availability in the spring, summer, and fall seasons? Please describe any parts of the year that are particularly busy for you.

(Optional) Is there anything else you would like to share?