

# MUROC LAKE GOLF COURSE GUEST PASS APPLICATION



**Complete From and Mail To:**

*Muroc Lake Golf Course  
111 Crest Drive, Bldg. 5611  
Edwards, CA. 93524-0001*

**Print: (Mr., Mrs., or Ms.) First Name, Middle Name, Last Name**

\_\_\_\_\_  
**Name of Employer:**

\_\_\_\_\_  
**Driver's License Number / Issuing State / Issue Date / Expiration Date**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**SSN:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

**Citizenship:** \_\_\_\_\_

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

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

**Telephone Numbers**

**Home:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Cell:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Work:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Fax:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Email:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**FOUO:**

**412 FSS/FSCG Golf Manager and 412 FSS/FSW Flight Chief**

**Printed Name:** DON HUISJEN / AARON FEINBERG