## ■ NAPGTOUR – Player Membership Form (Official)

Native American Professional Golf Tour

Season: 2026

SECTION 1 -	– PLAYER	INFORM	ATION
Full Legal Name:			

Preferred Name (optional):
Nation / Tribe / Community Affiliation:
Date of Birth (MM/DD/YYYY):
Phone Number:
Thore realises:
CONAL GOLETO
Email Address:
Mailing Address:
SECTION 2 — GOLF BACKGROUND
Years of Competitive Golf Experience:
■ 0–2 years ■ 3–5 years ■ 6–10 years ■ 10+ years  Current Handicap / Index:

Home Golf Course (if any):	
Previous Tours or Events Played (PGA	., APGA, amateur, Native tournaments, high school, college, etc.):
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SECTION 3 — PLAYER ST	
	ATUS
Applying for:	
■ Full Tour Membership	
■ Associate Membership (limited event	is)
■ Amateur Status (non-cash winnings)	
Player Category:	
■ Professional	
■ Amateur	
■ Upgrading Amateur to Professional (	Declaration Required)

## **SECTION 4 — JERSEY & ID DETAILS**

Shirt Size:  $\blacksquare$  S  $\blacksquare$  M  $\blacksquare$  L  $\blacksquare$  XL  $\blacksquare$  XXL  $\blacksquare$  XXXL

Headshot Submission:				
■ Attached ■ Will be emailed to: napgtour@outlook.com				
SECTION 5 — NATION VERIFICATION (REQUIRED)  Status/ID Card				
Nation Letter				
Enrollment/Registry				
Other:(Upload or attach documentation)				
SECTION 6 — CODE OF CONDUCT AGREEMENT  Uphold professionalism on and off the course  Respect all Host Nations & cultural protocols				
Maintain sportsmanship, honesty, and integrity				
Follow all NAPGTOUR rules, penalties, and dress codes				
Represent their Nation and the Tour with pride Signature:				
Date:				

## **SECTION 7 — MEDIA & IMAGE CONSENT**

I authorize the NAPGTOUR to use photos, videos, and media of me in:

- Tournament coverage
- Media publications

Marketing & promotion
Player profiles & rankings
Signature:
SECTION 8 — MEMBERSHIP PAYMENT
Player Membership Fee:
To be announced for the 2026 season.
(Online payment link will be provided after form approval.)
■ I understand that my membership is not active until payment is completed.
SECTION 9 — EMERGENCY CONTACT
Full Name:
- CONTAINED TOUR
Phone: A P G 10 U R
Relationship:
■ SUBMISSION
Completed forms + documents can be sent to:
napgtour@outlook.com
■ (Website upload coming soon)