



2017 MEMBER APPLICATION

INDIVIDUAL COUPLE FAMILY CORPORATE

PRIMARY MEMBERSHIP

Primary Member's Name _____

Home Address _____

City _____ Zip _____ Phone _____

E-mail Address _____ Birthday _____

ADDITIONAL FAMILY MEMBER(S)

1. _____ (Jr.?) Birthday _____

2. _____ (Jr.?) Birthday _____

3. _____ (Jr.?) Birthday _____

4. _____ (Jr.?) Birthday _____

Additional Family members MUST reside in the same household and be an immediate relation to the Primary Member. Junior Membership does not include riding cart unless accompanied by an Adult Member.

<u>For office use:</u>	
Date Paid: _____	Membership Amount: _____
Amt. Paid: _____	5.1 % Sales Tax: _____
Pymt. Info: _____	Total Due: _____