

2008 Golf Membership Enrollment Form

Name: _____

Spouse's Names (if applicable) _____

Additional Family Members (if applicable)

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Billing Address #1: _____

Effective Date: _____ Fax Number: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Billing Address #2: _____

Effective Date: _____ Fax Number: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Email Address: _____

Membership Fees.

Please check the applicable membership:

- | | | |
|--------------------------|---|-------------------------|
| <input type="checkbox"/> | Full Membership Individual | \$1,825 |
| <input type="checkbox"/> | Full Membership Husband and Wife | \$3,275 |
| <input type="checkbox"/> | Midweek Membership Individual | \$1,275 |
| <input type="checkbox"/> | Midweek Membership Husband and Wife | \$2,275 |
| <input type="checkbox"/> | Junior Membership (under 18 years of age) | \$400 |
| <input type="checkbox"/> | Value Season Membership Individual | \$800 |
| <input type="checkbox"/> | Value Season Membership Husband and Wife | \$1,400 |
| <input type="checkbox"/> | Additional Family Members (under 18 years of age) | \$400 per family member |