



2021 Golf Membership Form

NAME: _____ DoB: _____
(Last) *(First)* *(Initial)*

NAME (Spouse): _____ DoB: _____
(Last) *(First)* *(Initial)*

NAME: (Junior): _____ DoB: _____
(Last) *(First)* *(Initial)*

CELLPHONE: _____ EMAIL: _____

ADDRESS: _____
(Street)

(City) *(State)* *(Zip)*

MEMBERSHIP TYPE: _____

MEMBERSHIP OPTIONS:

Driving Range _____

Locker Full _____

GHIN Handicap _____

Locker Half _____

Unlimited Carts _____

Disclaimers:

*Memberships are not transferable

*Memberships cannot be downgraded

*No Refunds or Prorations

*30-days from date of purchase, to upgrade your membership, no proration applies

*Return checks fee - \$35.00