

APPLICATION FOR MEMBERSHIP

Name _____

Cell Phone Number _____ Date of Birth _____

Residence Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Name of Employer _____ Type of Business _____

Employer Address _____ Business Phone _____

Position _____ Length of Service _____

Preferred Mailing Address _____

Marital Status _____ Spouse's Name _____ Birth Date _____

Names of Dependents	Birth Date	Gender	Charging Allowed?
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Membership Agreement

The conduct of any member, or the conduct of a member's family or guest, which is deemed by management to be improper or likely to endanger the welfare, safety, harmony or reputation of the Club or its members, may result in that member being reprimanded, suspended or expelled from the Club. No refund of any initiation fee or membership dues would be given if a member is suspended or expelled.

Signature

Date

Payment Options:

1. Billing Statement paid via check
2. The current monthly balance will be charged to a credit card.

Card # _____ Exp. Date _____

Name on Card _____

Official Use Only:

Approved _____ Date _____ Member # _____