



MEMBERSHIP APPLICATION

Mr. Mrs. Ms. Miss Dr.

Applicant Name Date of Birth (mm/dd/yyyy) Social Security Number

Mr. Mrs. Ms. Dr.

Spouse/Companion Name Date of Birth (mm/dd/yyyy) Social Security Number

Primary Address

City State Zip

Secondary Address

City State Zip

Phone Local Cell/Other

Email Address(es)

PERSONAL OR BUSINESS REFERENCES:

Name & Address Phone

Name & Address Phone

Name & Address Phone

CLUB AFFILIATIONS (PAST OR PRESENT):

Club Name and Address Years you were a Member

Club Name and Address Years you were a Member

EMPLOYMENT INFORMATION:

Company Name Occupation

Address Phone

EMERGENCY CONTACT INFORMATION

Name to contact in case of emergency

Phone

Name to contact in case of emergency

Phone

FAMILY INFORMATION – UNMARRIED CHILDREN UNDER 21 LIVING AT HOME

Name

Date of Birth (mm/dd/yyyy)

Name

Date of Birth (mm/dd/yyyy)

Name

Date of Birth (mm/dd/yyyy)

CREDIT CARD INFORMATION:

Visa or MasterCard Number

Expiration Date (mm/yy)

Security Code

All Club charges will be payable upon receipt of the statement by check. If a credit card number is provided above, your card will be charged the statement balance on the 20th of each month.

I have received, reviewed, and understand the schedule of dues and fees for the category of membership chosen. I/We hereby apply for membership. I/We have reviewed and agree to abide by the By-Laws, Rules and Regulations, and Terms/Conditions of Membership of the Club. Membership dues are non-transferable and non-refundable.

Please Initial _____

Category of Membership

Single or Family Membership

Date Membership Begins (mm/dd/yyyy)

Signature of Applicant

Signature of Spouse

Dated (mm/dd/yyyy)

Dated (mm/dd/yyyy)

For office use only

Reviewed by _____

Salesperson

Applicant Approved (Date)

Membership Number Assigned

Thank you for joining The Club at Eaglebrooke. We require that you maintain your membership in good standing for a minimum of 12 months from the time that you join. Our regular policy of a 30 day notice is required for resignation. We hope to have you as a member for many years to come.

Member Name

Member Signature

Date

Witnessed by Club Representative