

Allendale Country Club

Application for Membership

Date of Application _____

Name _____ Social Security # _____ - _____ - _____

Class of Membership Desired _____ E-Mail Address _____

Date of Birth _____

Marital Status _____

Spouse's Name _____

Spouse's Date of Birth _____

Members of Family Obtaining Privileges (Children's names and birth dates)

1) _____

2) _____

3) _____

Residence Address _____ Zip Code _____

Home Phone _____

Business Address _____ Zip Code _____

Work Phone _____

Winter Address (if different) _____

Winter Phone (include area code) _____

Employer, position held, and for how long _____

Membership in other clubs in the past five years (give names, addresses, & dates)

References (at least three – other than members) for the Membership Committee to contact. Give name, address and telephone numbers.

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Please send my Mail – to my residence_____ to my business address_____ (check one)

Would you like to receive your monthly billing statement electronically? _____Yes _____No

To the best of my knowledge the above information is correct and accurate, and if any of the above statements prove to be false, the Board of Directors has the right to demand an immediate resignation.

If this application is favorably acted upon by the Board of Directors, the undersigned hereby agrees to be bound by the provisions of the By-Laws, Rules and Regulations and all amendments and additions thereto and further agrees to pay promptly all statements covering dues and other charges rendered by the Club. All members must have a current credit card on file. The member shall also be responsible for any expenses incurred in the collection of any outstanding balance including attorney’s fees.

In signing this application, I specifically authorize the Membership Committee to make such an investigation of my reputation, finances and desirability as a member as he or they, in their discretion, deem advisable.

Applicant Signature_____

Sponsor Signature_____

Sponsor Name (printed)_____ **Member #**_____

Sponsor must be an active playing member (other than members of the applicant’s immediate family or members of the Board of Directors). All questions on this application must be answered in detail.

IF THE ABOVE CONDITIONS ARE NOT COMPLIED WITH, THE MEMBERSHIP COMMITTEE CANNOT CONSIDER THE APPLICATION.

Upon completing this application, please return the application and the annual contract to the Club attention – Membership Committee.