

**2024 COLLEGE-AGE STUDENT  
MEMBERSHIP APPLICATION**

Date: \_\_\_\_\_

To The Taconic Golf Club Membership Committee:

I wish to apply for “College-Age Student Membership” at Taconic Golf Club.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

College Address: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Class of: \_\_\_\_\_

Category of membership under which I am applying:

- |   |         |
|---|---------|
| 1. Spring (Course Opening – Memorial Day) \$90.00 | _____   |
| 2. Summer (Memorial Day - Labor Day) \$90.00      | _____   |
| 3. Fall (Labor Day - Course Closing) \$90.00      | _____   |
| 4. Full Season (Spring, Summer & Fall) \$350.00   | _____   |
| 5. Mandatory Bag Storage \$50.00                  | \$50.00 |

**Total Due:** \_\_\_\_\_

To be included with application:

1. A copy of your College I.D.
2. Accompanied Payment\*\*\*

Signature of Student: \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*All college student members must have a credit card on file to cover purchases made in the pro shop and restaurant. The card will be automatically charged on the 21<sup>st</sup> of each month. All information on your application must be legible or your application will be delayed until corrected. Thank you.**

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

