



## 2024 U40 COLLEGE EMPLOYEE MEMBERSHIP APPLICATION

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

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Please provide proof of age with application

Local address: \_\_\_\_\_

Tel: \_\_\_\_\_

E-MailAddress \_\_\_\_\_

Other members of the family who are included in this application:

Spouse: \_\_\_\_\_

Other golf clubs of which applicant is a member:

\_\_\_\_\_

Signature: \_\_\_\_\_

### **2024 Membership Dues & Fees**

Applicants Age 18-30 on January 1, 2024 \$1,252

Applicants Age 31-40 on January 1, 2024 \$1,877

\$25 Monthly Capital Assessment Fee

\$300 Food & Beverage Minimum