



2024 Under 40 Regular Membership Application

Date: _____

Taconic Golf Club Membership Committee:

I wish to apply for "Under 40 College Employee Membership" at Taconic Golf Club

Name: _____ Date of birth: _____

Local address: _____

Tel: _____

E-Mail

Address _____

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

Applicant age 18-30 on January 1, 2024: \$1,928

Applicant age 31-40 on January 1, 2024 \$2,892

\$25 monthly Capital Assessment Fee

\$300 Food & Beverage Minimum