



2020 WILLIAMS COLLEGE STUDENT MEMBERSHIP APPLICATION

To The Taconic Golf Club Membership Committee: Date: _____

I wish to apply for "Williams College Student Membership" in Taconic Golf Club.

Name: _____ Date of birth: _____

Williams College Address: _____ Tel: _____

E-Mail Address _____ Class of: _____

Category of membership under which I am applying:

1. Spring (Course Opening - Graduation) \$80.00 _____
2. Summer (Graduation - First Day of Fall Semester) \$159.00 _____
3. Fall (First Day of Fall Semester - Course Closing) \$80.00 _____
4. Summer & Fall or Spring & Summer \$239.00 _____
5. Full Season (Spring, Summer & Fall) \$318.00 _____
6. Golf Bag Storage (Required) \$50.00
7. Total Due to Taconic Golf Club _____

To be included with application:

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

Signature of Student: _____ Date: _____