

# Piney Point Golf Club

## MEMBERSHIP APPLICATION

Name	Mobile phone	Home Phone	
Name preferred to be called	Birthday	Anniversary	
@			
Email Address			
Mailing Address	City	State	Zip
Present Occupation or Profession		Business Phone	
Name of Employer		Address	

**All proposals for membership shall first be approved by the membership committee and then be submitted to the Board of Directors for approval. Upon approval by the Board, the membership will become effective upon receipt of the appropriate amount of dues and fees. By signing below, I, the applicant, understand and agree to the above.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Sponsors: 1) \_\_\_\_\_ Member No. \_\_\_\_\_

2) \_\_\_\_\_ Member No. \_\_\_\_\_

Type of Membership Applying for:  Resident  Non-Resident  Non-Resident (40+)  Junior Executive  
 Social  Pool

Do you wish to pay your dues  Monthly  Quarterly  Annually

Statements will be emailed to the address provided unless you indicate otherwise -  Do not email.

Do you wish to receive updates by:  email  text  both  
(if text, please indicate you carrier \_\_\_\_\_)

Do you wish to enroll in the CGA Handicap program?  Yes  No

\* \* \* \* \*

.....FOR OFFICE USE ONLY.....

Date application received: _____	Membership start date: _____	Membership No: _____	Notes:
Date approved by the Board: _____	Membership Record date entered _____		
Charges: Date entered _____	<input type="checkbox"/> MO/QT/YR Dues		
<input type="checkbox"/> Initiation Fee	Amount \$ _____	<input type="checkbox"/> CGA Handicap	
<input type="checkbox"/> CGA Fee	Amount \$ _____		
<input type="checkbox"/> _____	Amount \$ _____		

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**Please include the following people in this membership:**

Family	Son/Dau/Grnd	Birthdate	Email address
S)	N/A		@

Spouse's Profession: \_\_\_\_\_ Business Phone: \_\_\_\_\_

*(Children under the age of 18 or 23 if a full-time college student; grandchildren under the age of 16)*

Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@
Child)			@

**Office Notes:**

Paid \$\_\_\_\_\_ on \_\_/\_\_/\_\_ by check cash card

- Breakdown of payment:
- \$\_\_\_\_\_ initiation fee
  - \$\_\_\_\_\_ processing fee
  - \$\_\_\_\_\_ dues
  - \$\_\_\_\_\_ CGA handicap fee
  - \$\_\_\_\_\_ locker rental
  - \$\_\_\_\_\_ storage (club/pullcart)

Other information: \_\_\_\_\_  
 \_\_\_\_\_