

PERRY COUNTRY CLUB

APPLICATION FOR MEMBERSHIP

Perry Country Club is privately owned and operated as a public golf club.

NAME AND ADDRESS INFORMATION

Name (please print) _____
Date of Birth ____/____/____
Home Address _____
City _____ State _____ Zip _____
Home Phone (____) _____ Marital Status _____
Company Name _____ Type of Business _____
Title _____ Business Phone _____
Business Address _____
City _____ State _____ Zip _____
E-mail address _____

SPOUSE INFORMATION

Spouse's Name (please print) _____
Date of Birth ____/____/____
Spouse's Company Name _____ Type of Business _____
Spouse's Title _____ Business Phone _____
Business Address _____
City _____ State _____ Zip _____
E-mail address _____ Wedding Anniversary Date ____/____/____

DEPENDENT INFORMATION

Name (under 21 years/resident of applicant)	Date of Birth	Sex
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____

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AFFILIATIONS

I am currently a Member of the following clubs:

TYPE OF MEMBERSHIP

Family Single Out of County
 Intermediate Junior Social/Pool

The undersigned applicant hereby applies for the type of membership described above. Each new membership must remain active for a minimum of three months. If a member resigns prior to their third month, they must pay the difference of dues. If this application is approved the applicant agrees to abide by the rules and the regulations of Perry Country Club. All dues paid are non-refundable or non-transferable. Any and all resignations from the Club must be in writing. **Your dues will continue until the Club has received a written notification of resignation.**

Signature of Applicant _____ Date _____

Junior Applicant-Parent Signature _____

OFFICE USE ONLY

Dues paid \$ _____ Check # _____

Dues representing month of _____