



PO BOX 246
414 COUNTRY CLUB ROAD
NEWBERRY SC 29108
803-276-2385 PHONE
803-276-8545 FAX

FAMILY MEMBERSHIP APPLICATION

Date: _____

I _____ age _____ hereby apply for membership to the Country Club of Newberry. Attached hereto is my check to cover the \$125.00 for one share of stock and \$125 to cover one month's dues.

If approved, I understand that I am responsible for all conduct and debts of the members of my family and guest. Listed below is pertinent information, which I certify to be correct. At such time membership is cancelled or terminated, the Club has the option to recall the stock. The B-shares of stock are void if membership is cancelled or terminated and can not be used if member rejoins at a later date. If at any point you wish to terminate your membership, you are required to do so in writing or dues will continue to incur.

If family membership please provide the following information: Applicant date of birth _____
Spouse _____ Age _____ Date of Birth _____

Children (21 years of age or under only OR full time student under 25)

_____ Age _____ _____ Age _____
_____ Age _____ _____ Age _____
_____ Age _____ _____ Age _____

Home Address _____

Home Telephone: (____) _____

Present Employer: _____ Business Telephone: (____) _____

Email Address: _____

Applicant Signature: _____

NOTE: The Board of Directors usually meet on the third Monday of each month. Your application will be considered at that time. Soon after you will receive a reply.

MONTHLY DUES WILL BE AUTOMATICALLY DRAFTED FROM YOUR BANK ACCOUNT OR CREDIT CARD. PLEASE ATTACH A VOIDED CHECK OR CREDIT CARD INFORMATION.

You must have (3) members sign this application as sponsors.

Primary sponsor: Secondary sponsor: Secondary sponsor:

(1) _____ (2) _____ (3) _____

Sponsor please print:

(1) _____ (2) _____ (3) _____