



Application for Membership

Applicant Name: _____ Age: _____

Email Address: _____

Residence Address: _____ Phone: _____

City: _____ State: _____ Zip code: _____

Spouse's Name: _____ Age: _____

Children's Names _____ D.O.B. _____

Applicant Business: _____

Position: _____ Work Phone: _____

Spouse Business: _____

Position: _____ Work Phone: _____

Previous Club Affiliation: _____

I _____ hereby submit my request for membership in *Spring Meadows Country Club* and agree, if accepted, to abide by all rules, regulations, and By-Laws of this organization. It is further understood that any deposit made for a future stock share is non-refundable. It is also understood and agreed that I will keep this membership for a minimum period of 15 months. **Initials** _____

Applicant Signature: _____ Date: _____

Sponsor Signature: _____ Date: _____

Business Office Use Only

Date Received _____ Member# _____ Amount Paid _____

Food Min. Paid _____

Type of Membership: STOCK GOLF ASSOCIATE JUNIOR
 SOCIAL DINING SOCIAL DINING/ POOL BUSINESS SOCIAL

*All applicants are subject to credit approval.