



# MEMBERSHIP APPLICATION

**Member Number:** \_\_\_\_\_ **Membership Join Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

**Spouse:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

**Children:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

*Please list any additional children on the back of this form.*

**Membership Category:**

- Junior 1-Single (19-29 Years)
- Junior 1 – Family
- Junior II-Single (30-39 Years)
- Junior II-Family
- Single
- Single PLUS
- Clubhouse I Family
- Clubhouse II Family
- Racquet Family
- Family
- Unlimited Golf Single
- Unlimited Golf Family
- Non-Resident Single
- Non-Resident Family

30-Day Trial

Monthly Dues: \_\_\_\_\_

Food Minimum: \_\_\_\_\_

Initiation Fee:

One Time \$250 payment

Two payments of \$125 each

Quarterly Capital Projects Fund:  
\_\_\_\_\_

Residence Address: \_\_\_\_\_  
\_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_  
\_\_\_\_\_

Place of Employment: \_\_\_\_\_

*Bills will be sent to the email address provided unless otherwise specified*

**I will pay my bill by:**

- Check (payment is due by the 10th of the month)
- Credit Card draft (Drafted on the 5th.)
- Bank Draft (Drafted on the 5th)

*If you are signing up for Automatic draft (Credit card or bankdraft), please fill out the Authorization Agreement for Automatic Payments attached.*

*I hereby make my application for membership in the Eufaula Country Club of Eufaula, Alabama, subject to the constitution, By-Laws and all the rules and regulations of the Club. I understand that if I break my contract before the end of the year, I will be legally responsible for paying the full amount of the initiation fee and any outstanding balance. I understand that a 30-day notice is required to break my contract and forgo my membership.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MEMBER SPONSOR: \_\_\_\_\_ MEMBER #: \_\_\_\_\_

