



# ENGLISH TURN GOLF & COUNTRY CLUB

## APPLICATION FOR MEMBERSHIP

I accept my invitation of membership and provide the following for the Club's use in establishing my membership account at the Club.

Mr.  Mrs.  Ms.  Dr.

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Company Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Title \_\_\_\_\_ Length of Employment \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Marital Status:  Married  Single

E-mail Address \_\_\_\_\_

### SPOUSE INFORMATION

Mr.  Mrs.  Ms.  Dr.

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Company Name \_\_\_\_\_ Type of Business \_\_\_\_\_

Title \_\_\_\_\_ Length of Employment \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### DEPENDENT INFORMATION

Name	Date of Birth	Sex	Charge Privileges	Name	Date of Birth	Sex	Charge Privileges
_____	____/____/____	____	Yes ___ No ___	_____	____/____/____	____	Yes ___ No ___
_____	____/____/____	____	Yes ___ No ___	_____	____/____/____	____	Yes ___ No ___

### CLUB AFFILIATIONS

I am currently a member of the following club:

Club: \_\_\_\_\_ City \_\_\_\_\_ Years as a member \_\_\_\_\_

### PERSONAL REFERENCES

My Membership Sponsor: \_\_\_\_\_

Other Personal Reference: (can be a non-member) Business Phone \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

**MEMBERSHIP CLASSIFICATIONS**

I am applying for membership in the following category: \_\_\_\_\_

**PAYMENT SCHEDULE**

Initiation Fee Deposit \$ \_\_\_\_\_ Financed Amount \$ \_\_\_\_\_

Terms \_\_\_\_\_ Transfer/Reinstatement Fee \$ \_\_\_\_\_

\$ \_\_\_\_\_ Louisiana State Sales Tax of 9% is applicable to above fees.

I hereby agree to all terms and conditions stated herein. I authorize the Club to check my credit and employment history to obtain such information as the Club deems necessary to establish my membership account at the Club.

\_\_\_\_\_ Date \_\_\_\_\_  
(Applicant s Signature)

NO ASSESSMENTS - The Club shall not impose an assessment on members for Club capital improvements or other similar expenditures. Members are responsible for Membership Fees and Deposits and applicable dues incurred by the Member and other guests in the use of the Club.

OWNERSHIP - Membership in the Club does not include any ownership interest of any of the assets thereof or any ownership interest in assets of the surrounding community (including any real property or common areas), nor does it entitle the member to participate in the earnings of the Club or create any voting or management rights therein.

FAMILY - Each and every individual accepted as a Member of the Club recognizes that the privileges of membership in the Club are appurtenant only to the member designated as such on the Membership Certificate. However, the family of the Member may be entitled to the use of the Club facilities available to the member, but only in accordance with the Rules and Regulations and only after payment of such fees and charges, if any, established therefor by the Board of Directors.

BYLAWS, RULES & REGULATIONS - All Members and persons using the Club are bound by and shall comply with the Bylaws, Regulations and Regulations of the Club, as they are amended from time to time.

RESTRICTIVE STARTING TIMES - The Board of Directors may establish restrictive starting times for golf on a gender or other similar basis. For example, ladies only starting times, men s only starting times or mixed couples only starting times are permitted to be established in order to promote camaraderie among members.

RESIGNATION AND REFUND - A Member may resign from the Club by giving thirty (30) days advance written notice to the Club and by paying all dues and other charges due. \_\_\_\_\_

Applicant agrees that in the event of a corporate reorganization or personal divorce, this Membership is not dividable and the Membership shall be allocated by agreement of all claimants or in the absence of agreement, by court order. Such allocations are subject to the sole approval of the Membership Committee. The successor to the Membership shall execute all necessary papers and pay all allocation fees required by the Club.

English Turn property owners will be offered a one time exemption from paying initiation fees upon joining the Club.

Food and Beverage Minimum (Non-Resident Membership is excluded) - \$150 per quarter. \_\_\_\_\_

**CORPORATE MEMBERSHIP (IF APPLICABLE)**

Corporate memberships are held by a corporation or firm/(which is considered to be the "Applicant" for all purposes). A designee is named by the corporation as the person entitled to use the Membership (the "Corporate designee"). There shall be a maximum of five (5) Corporate designees for each Corporate membership, but the Corporate designee may be charged by the corporation from time to time, subject to the approval of the Club s Membership Committee and payment of the transfer fee (as the date of charge). The membership card will be issued in the name of the approved Corporate designee.

As a duly authorized officer of the corporation named, the undersigned officer certifies and agrees that said corporation is jointly responsible with the Corporate designee for all dues and charges incurred by its Corporate designee and guests.

Corporate Designee s Signature \_\_\_\_\_ Title \_\_\_\_\_

Officer s Signatures \_\_\_\_\_ Title \_\_\_\_\_

Corporation \_\_\_\_\_ Federal Tax ID# \_\_\_\_\_

\*\*\*\*\* For Club Use Only \*\*\*\*\*

Accepted on behalf of the Membership Committee \_\_\_\_/\_\_\_\_/\_\_\_\_

By: \_\_\_\_\_ Title \_\_\_\_\_

Member # \_\_\_\_\_ Certificate \_\_\_\_\_ Class # \_\_\_\_\_

Initiation Fee \$ \_\_\_\_\_ Refundable Amount \$ \_\_\_\_\_ ( If applicable)

Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Refund \_\_\_\_/\_\_\_\_/\_\_\_\_

P/T: P/O \_\_\_\_\_ N/PO \_\_\_\_\_