



## 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.*

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

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

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

Spouse's Email Address: \_\_\_\_\_

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

### 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
- ☐ Court Sports Family
- ☐ Family
- ☐ Unlimited Golf Single
- ☐ Unlimited Golf Family
- ☐ Non-Resident Single
- ☐ Non-Resident Family

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

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

Initiation Fee:

- ☐ One Time \$250 payment
- ☐ Two payments of \$125 each

Quarterly Capital Projects Fund:

*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 #: \_\_\_\_\_