



NAME: _____ DATE OF BIRTH _____

HOME ADDRESS: _____ CITY _____ ST _____ ZIP _____

MAILING ADDRESS: _____ CITY _____ ST _____ ZIP _____

HOME PHONE: _____ CELL PHONE: _____ E-MAIL: _____

NAME OF SPOUSE: _____ DATE OF BIRTH _____

CELL PHONE: _____

UNMARRIED CHILDREN UNDER 21 YEARS OF AGE

1 _____ DATE OF BIRTH _____

2 _____ DATE OF BIRTH _____

3 _____ DATE OF BIRTH _____

APPLICANTS EMPLOYER: _____ TELEPHONE _____

OCCUPATION: _____ TITLE _____

BUSINESS ADDRESS: _____ CITY _____ ST _____ ZIP _____

SPOUSE'S EMPLOYER: _____ TELEPHONE _____

OCCUPATION: _____ TITLE _____

BUSINESS ADDRESS: _____ CITY _____ ST _____ ZIP _____

MEMBERSHIP CATEGORY: FULL: _____ ABSENTEE: _____ HOUSE: _____

POOL: _____ TENNIS: _____

Upon acceptance of my membership application, I agree to pay all initiation fees, dues, and I further agree to abide by the rules and regulations of The Emerald Golf Club as the same may be established from time to time. All initiation fees are non-refundable.

I understand that the Membership Rules and Regulations for The Emerald Golf Club are available at www.emeraldgc.com/membership and accept the conditions and rules set forth therein.

DATE _____ SIGNATURE _____