

Carambola Golf Club / 2012 Membership Application

Name: _____ DOB ___/___/___ Spouse: _____ DOB ___/___/___
 Children's Names: _____ DOB ___/___/___ Name: _____ DOB ___/___/___
 E-mail address: _____ Spouse's E-mail: _____
 Local Address: _____ Stateside Address: _____
 Phones H: _____ W: _____ C: _____

All Memberships include family social membership, range membership and club charging privileges

ANNUAL MEMBERSHIPS (revised 12/17/11)

Individual Membership:

Regular: \$3,295 Paid in Full \$865 Paid Quarterly \$365 /month for 10 months
 Age 40 & under: \$2,200 Paid in Full \$580 Paid Quarterly \$240 /month for 10 months

Family Membership: (includes both spouses & unmarried children under 18 years of age)

Regular: \$4,795 Paid in Full \$1,260 Paid Quarterly \$525 /month for 10 months
 Both age 40 & under: \$3,200 Paid in Full \$840 Paid Quarterly \$350 /month for 10 months

Associate Membership: \$1,385 Paid in Full \$740 Paid Semi-Annually pays \$20/25 for 9/18 holes

Associate Family Members: \$2,255 Paid in Full \$1,200 Paid Semi-Annually pays \$20/25 for 9/18 holes

OTHER MEMBERSHIPS (revised 12/17/11)

SEASONAL MEMBERSHIP: \$2,255 Individual \$3,180 Family (good for any 4 consecutive months)

MONTHLY MEMBERSHIP: \$650 Individual \$850 Family

10% Discount on all membership types for SENIORS (65 or older), Hovenssa & its Contractors

	Membership Fees	\$ _____
Club Storage (No. of bags): _____ at \$125/bag		\$ _____
Locker Rental (Qty): _____ at \$125/locker		\$ _____
Both Club Storage & Locker: _____ at \$225		\$ _____

READ CAREFULLY BELOW BEFORE SIGNING

TOTAL

\$ _____

Fees & Payment: All membership contracts with CGC include use of the pool, tennis courts and charging privileges. I understand that I am signing a 1-year contract and that CGC is extending the privilege of paying the year membership fee in installments. I understand that if I leave or otherwise discontinue the use of my membership. I am still obligated to make all monthly or quarterly payments through the remainder of the contract year. I hereby give my permission to Carambola to debit my credit card (below) on the first of each month all payments are made. Dues will be assessed each month or quarter regardless of whether I utilize the club facilities or not. I am also authorizing Carambola to debit my card for any other charges that I make at the club if I am more than 30 days late plus applicable late fees. I also agree that I and my family member lose playing privileges if my balance is unpaid for 90 days or exceeds \$2,500, whichever comes first. _____ **Initials**

Code of Conduct: CGC has the right to terminate the membership of any member or ban from its property indefinitely, without compensation, anyone who conducts themselves in a way detrimental to the best interest of the club, its members and/or its guests and/or its employees, in the opinion of the management of the club. This includes but is not limited to possession of a firearm on Club property, acting in a threatening manner toward guests or staff, bringing a dog on the property or engaging in illegal activities. I do hereby agree to abide by all the rules, regulations and Code of Conduct of the CGC. _____ **Initials**

Carambola Cart & Liability Agreement: I represent that I am familiar with the operation of CGC golf carts and agree to return said cart at the end of play in as good condition as received excepting normal wear & tear. I agree to hold CGC free & harmless from any damages or claims arising from my use of said cart involving myself or any passengers, adult or child, and further agree to pay for all damages sustained while said cart is in my possession. I further represent that I am over 16 years of age. Additionally, I agree to release and hold harmless CGC from any and all liability for injuries while using CGC facilities and participating in its events. _____ **Initials**

CREDIT CARD INFORMATION – MANDATORY for Installment plans and/or Charging Privileges

Credit Card Type: **MasterCard** **VISA** **AMEX** Acct#: _____ Exp Date: ___/___/___

Authorized Signature: _____ **Spouse Signature:** _____

FOR ADMINISTRATIVE USE ONLY

Date App Rec'd: / /	Date Approved: / /	Member #:	Locker #:
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