



# Charter Membership

Application for Charter Membership Privileges

Property Owner    Non-Property Owner

## Personal

Applicant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver License Number & State \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver License Number & State \_\_\_\_\_ Anniversary Date \_\_\_\_\_

Mailing/Billing Address \_\_\_\_\_

Number

Street

City

State

Zipcode

Telephone \_\_\_\_\_

Second Address \_\_\_\_\_

Number

Street

City

State

Zipcode

Telephone \_\_\_\_\_

List children under the age of 23 who reside at home or attend school on a full-time basis:

Name

Birth Date

Residence

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

# Business

Applicant's Occupation \_\_\_\_\_ Title \_\_\_\_\_

Employer & Address \_\_\_\_\_

Telephone \_\_\_\_\_ Years in Present Employment \_\_\_\_\_  Retired

Spouse's Occupation \_\_\_\_\_ Title \_\_\_\_\_

Employer & Address \_\_\_\_\_

Telephone \_\_\_\_\_ Years in Present Employment \_\_\_\_\_  Retired

Bank Reference, Address and Account Number:

\_\_\_\_\_

Name

Address

## Credit Card Information

I hereby designate the following VISA/MASTERCARD to be used by me and my authorized family members for fees and charges at the Club. The Club may bill such fees and charges directly to me on this credit card account. I understand that a copy of the vouchers will be kept on file if I should have any questions concerning a charge made to my account.

Designated Credit Card and Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

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

## Club Reference

Club Memberships (please designate whether a current or former membership):

Name of Club

City, State

Current or Former Member

1. \_\_\_\_\_

2. \_\_\_\_\_

## PGA National Members Club Sponsor

Name

Address

Phone

1. \_\_\_\_\_

2. \_\_\_\_\_

1. I hereby apply for the following category of Membership in PGA National Members Club (the "Club") and submit the corresponding membership deposit as follows:

**Check Appropriate Category:**

- Family                       Full Golf                       Tennis  
 Individual                       Sports                       Social

2. I understand that this application will not be acted upon unless fully completed, signed and accompanied by a check in U.S. funds for the required fees. Membership is contingent upon approval by the Club, which approval shall be at its discretion.

3. As a material consideration for the Club to extend membership privileges to me, I hereby acknowledge that the use of the Club facilities, including but not limited to the golf courses, racquet club, health spa, salon or clubhouse, and any service or privilege incident to membership in the Club is voluntary and that any use or acceptance of any service or privilege incident to membership is undertaken with knowledge of the risk of possible injury. It is agreed that all Club activities, including but not limited to, the use of weights, pools, massage therapies, skin and body treatment, golf or racquet club clinics or tournaments, and the use of any and all machinery, equipment and apparatus designed for the same, shall be at the Member's sole risk and I hereby accept any and all risk of such injury to myself, my guests and family members sustained while using the Club facilities or involved in any event or activity incident to membership in the Club. It is further understood that the selection of any and all golf, health, racquet or spa activities, methods and types of machinery, equipment and/or apparatus used by me, my guests or family members, including but not limited to weights, spa therapies and golf carts, shall be my complete responsibility. In accepting this risk of injury, I understand that I am relieving the Club and those employed by or affiliated with the Club from any and all loss, cost, claims, damage, actions, causes of action, negligence, or suits in equity, of whatever kind of nature, sustained or incurred by me, my guests and my family members resulting from or arising out of any conduct, event or service connected with membership in the Club and use of any of the Club facilities, including any act negligently taken or omitted by the Club. I hereby hold the Club, its employees, partners, agents and affiliates, harmless from any and all claims which may be brought against them by me, my guests or my family, or on behalf of same, for any such injuries or claims.

4. I unconditionally and irrevocably authorized the Club to request and receive such information for investigation of the applicant's qualifications for membership as it deems appropriate, including without limitation the applicant's credit history. I further authorize any person or entity to disclose to the Club information requested by the Club and further agree to hold the Club harmless from any and all such acts.

5. I hereby acknowledge receipt of the Plan for the Offering of Charter Memberships in PGA National Members Club dated May 23, 1990 and agree to be bound by the terms and conditions thereof as the same may be amended from time to time by the Club in its discretion. I also understand that membership is on a non-proprietary basis. I understand that membership may be terminated by the Club, in its sole discretion, for failure to abide by membership conditions as set forth herein and in the Rules and Regulations. I hereby acknowledge that I have reviewed the Rules and Regulations of the Club, specifically the following Sections of the Rules and Regulations regarding my membership rights:

- |                      |  |
|----------------------|--|
| Article A Section 2  | Charter Membership Rights                |
| Article A Section 15 | Suspension and Termination of Membership |
| Article A Section 16 | Loss or Destruction of Property          |
| Article A Section 19 | Conversion to Equity Member-Owned Club   |
| Article A Section 20 | Acknowledgement of Membership Rights     |

6. I hereby accept the membership privileges granted to me pursuant to this Application in place of any present and prior rights in or to use the Club facilities I have, if any.

Date \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Spouse's Signature

# Club Directory/Membership Card Information

Indicate full name of member, member's spouse and their children under the age of 23 who reside at home or attend school on a full-time basis. EACH PERSON DESIGNATED BELOW MUST SIGN WHERE INDICATED.

MEMBER'S NAME (PRINT)

SIGNATURE

SPOUSE'S NAME (PRINT)

SIGNATURE

CHILD'S NAME (PRINT)

SIGNATURE

CHILD'S NAME (PRINT)

SIGNATURE

CLUB DIRECTORY: Please indicate whether you would like to be listed in the Club Directory, and which address and phone is to be listed.

Yes  No

Address \_\_\_\_\_

Membership Category \_\_\_\_\_ Phone \_\_\_\_\_

Club interests:  Golf  Tennis  Croquet  Health & Fitness, etc.

Would you like to serve on a Club Committee?  Yes  No

This Membership Application shall not be binding on the Club until the acceptance below is signed.

PGA NATIONAL MEMBERS CLUB

Date: \_\_\_\_\_ By: \_\_\_\_\_