

CEDAR CREST COUNTRY CLUB

P.O. Box 3184
Quincy, Illinois 62305

Website: cedarcrestquincy.com
Email: cedarcrestcountryclub@yahoo.com

APPLICATION FOR MEMBERSHIP

(Effective January 1, 2017)

The undersigned has applied for membership at Cedar Crest Country Club and agrees, if accepted, to abide by the constitution, by-laws, rules and regulations now amended.

HAVE YOU EVER BEEN A MEMBER AT CEDAR CREST COUNTRY CLUB? ___ YES ___ NO

Membership Type	Owner	Associate	Minimums
21 – 35 Single Membership	___ \$ 714	___ \$ 714*	\$30**
Single Membership	___ \$ 952	___ \$ 952*	\$45**
Senior Single Membership (65)	___ \$ 906	___ \$ 906*	\$40**
21 – 35 Family Membership	___ \$ 992	___ \$ 992*	\$45**
Family Membership	___ \$1,323	___ \$1,323*	\$45**
Senior Family Membership (65)	___ \$1,153	___ \$1,153*	\$40**
Social Membership (Single or Family)	___ \$ 114	___ \$ 114 ***	\$ 0

First year membership is prorated by month joined. 2017 Introductory Membership ___ \$ 800

*Non-certificate holding members (associate members) are billed \$100 annually after their first year of membership. The funds are applied toward the purchase of their certificate of ownership. The cost of the certificate is \$1,000. Associate members may pay off the balance of their certificate at any time.

**Owners and associate members are currently billed \$25 monthly for the capital improvement fund, and must pay any assessments (this is subject to change).

***Social memberships are not afforded golfing privileges, but have full use of the clubhouse throughout the year and may attend all social functions. Social members may pay green fees to golf a maximum of 5 times.

All membership fees except social and introductory include \$200 annual trail fee. Owners of electric carts will be charged an additional \$25. ___ No Cart or Gas Cart ___ Electric Cart

Owners and associates paying trail fees are entitled to unlimited use of their cart at Cedar Crest Country Club. The loaning of privately owned carts is prohibited to anyone other than a current owner or associate member. Storage space will be furnished as it becomes available.

AGE AS OF JANUARY 1st OF THE CURRENT CALENDAR YEAR

Applicant Name _____ Age _____

Spouse Name _____ Age _____

Address _____ Phone _____

Email _____

List Children under 21 Years of Age living at home

Child Name _____ Age _____

Child Name _____ Age _____

Child Name _____ Age _____

Applicant agrees that membership shall be in effect continuously from year to year and notice of termination must be in writing no later than the end of the calendar year. This application will not be considered unless at least 50% of the first year dues are included.

Signature of Applicant _____ Date _____

Signature of Sponsor _____ Date _____

For office use only.

Date Received _____ Sent to Board _____ Posted _____ Accepted _____