

Douglas Golf and Country Club

P.O. Box 1007
Douglas, GA 31534

The following information, supplied by the member, is required before any application will be considered for acceptance:

Name: _____ Date of Birth: _____
Spouse's Name: _____ Phone Numbers: _____
Home Address: _____

I would like to sign up for text message updates
City _____ State _____ Zip _____ Email address: _____

Employed By: _____ Occupation: _____

Membership desired: ___ Associate ___ Jr/Widow/Senior ___ Social ___ Corporate
\$85.00/month \$105.00/month \$175/month 15% discount
Check which applies. If applying under a corporate business please also check corporate.

Signature of Applicant _____ SSN: _____
Signature of Spouse _____ SSN: _____

*Payment Frequency: ___ Monthly ___ Quarterly ___ Semi-Annually ___ Annually

**Bank Draft Information:

Routing Information _____ Account Number _____

The applicant will be held responsible to pay all monies due under this agreement. The club's regular billing date is the last day of each month, with balances due and payable by the 15th of the following month. In 2016 the Board of Directors elected to implement auto-draft which takes place on the 15th of each month. The statement will include the dues for the next month and incidentals for the current month. A late fee of \$25.00 is in effect for balances owed after 30 days of each statement date.

For office use only

Board Approval Signature _____ Date _____

General Manager _____ Date _____