

# **EAST RIDGE COUNTRY CLUB APPLICATION FOR MEMBERSHIP**

## **SEASONAL POOL**

**WELCOME TO THE CLUB!**

**PLEASE COMPLETE THE APPLICATION BELOW SO THAT WE MAY BECOME MORE FAMILIAR WITH YOU AND YOUR FAMILY. RETURN TO THE CLUB OFFICE AT YOUR EARLIEST CONVENIENCE. THANK YOU.**

**I/WE THE UNDERSIGNED ARE PRESENTING THE BELOW APPLICATION FOR MEMBERSHIP IN THE EAST RIDGE COUNTRY CLUB. AS A SEASONAL MEMBER OF THE CLUB, WE HAVE BEEN APPRISED OF THE PARTICULARS OF THIS MEMBERSHIP CLASSIFICATION, AND DO HEREBY AGREE TO THOSE TERMS AND CONDITIONS. FURTHERMORE, IF ACCEPTED FOR MEMBERSHIP, I/WE AGREE TO HONOR ALL CONDITIONS AS OUTLINED IN THE CLUBS BY-LAWS.**

**MR.  
MRS.  
MS.**

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**ADDRESS**

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**CITY**

**STATE**

**ZIP CODE**

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**SPOUSE NAME**

**HOME PHONE**

**BUSINESS PHONE**

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**Cell Phone**

**Email Address**

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**1]**

**2]**

**3]**

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**CHILDREN, PLEASE INCLUDE AGES**

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**EMPLOYMENT**

**POSITION**

**YEARS WITH FIRM**

**PLEASE READ BEFORE SIGNING**

**SEASONAL POOL MEMBERSHIP IS GENERALLY BETWEEN THE DATES OF MEMORIAL DAY AND LABOR DAY, EACH CALENDAR YEAR. MEMBERS MAY ENJOY FULL USE OF THE POOL AREA AND ALL FOOD AND BEVERAGE FACILITIES OF THE CLUB, DURING THE ABOVE DAYS. AS A MEMBER OF THE CLUB, YOU WILL RECEIVE AN ACCOUNT NUMBER FOR YOUR UTILIZATION, WHICH MAY BE USED TO CHARGE FOOD, BEVERAGES, POOL GUEST FEES, ETC. TO YOUR INDIVIDUAL ACCOUNT. MEMBERSHIP IS FOR THE IMMEDIATE FAMILY MEMBERS, AS ABOVE, ALL OTHERS SHALL BE CONSIDERED YOUR GUESTS. PLEASE NOTE: ALL GUESTS MUST REGISTER AT THE POOL ENTRANCE, AND ARE SUBJECT TO CERTAIN LIMITATIONS RESTRICTING THE NUMBER OF GUEST VISITS DURING THE ABOVE DATES.**

**[SEE REVERSE]**

**PLEASE BE SURE TO SIGN AND DATE 2<sup>ND</sup> PAGE**

**ALL POOL APPLICANTS MUST PROVIDE A CREDIT OR DEBIT CARD FOR ALL CHARGES INCURRED. YOUR CARD WILL BE CHARGED MONTHLY.**

**YOUR MEMBERSHIP MAY BE CONVERTED, UPON YOUR REQUEST, TO ANOTHER CLASSIFICATION OF MEMBERSHIP, SUBJECT TO THE TERMS AND CONDITIONS OF SAID MEMBERSHIP.**

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2017.

XX  
Sign Here

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**FOR OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

AMOUNT RECEIVED: \$ \_\_\_\_\_

MEMBERSHIP NUMBER: \_\_\_\_\_

SEASONAL DUES AMOUNT: \$1100.00 PLUS TAX TOTAL: \$1191.85

TOTAL MEMBERSHIP FEE DUE: \$ \_\_\_\_\_

CHECK NUMBER OR CASH AMOUNT: \$ \_\_\_\_\_

**CREDIT CARD INFORMATION:**

**KIND OF CREDIT CARD:** \_\_\_\_\_

**NAME OF CREDIT CARD:** \_\_\_\_\_

**NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_\_