

El Dorado Golf Country Club

Membership Application

(Please Print)



Date _____

Membership Option

(Circle One)

Regular

Ladies

Corporate

Non Resident

National

Young Executive

Applicant Information

Name _____

Date of Birth _____

Name of Spouse _____

Spouse Date of Birth _____

Email Address _____

Email Address _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Numbers House _____ Work _____

Cell _____ Cell (2) _____

Children

Name _____

Date of Birth _____

Name _____

Date of Birth _____

Name _____

Date of Birth _____

Employment Information

Company Name _____

Title or Position Held _____

Business Address _____

City _____ State _____ Zip _____

Current Status _____

(Check One) Active _____ Retired _____

El Dorado Golf Country Club

Membership Application

Automatic Account Payment

_____ **ACH** (See attached form)

_____ **Credit Card**

Account Balance will be automatically charged to your credit card on or near the 1st, 15th or 28th of each month. El Dorado Golf & Country Club may assess late charges on accounts that have a declined and/or expired credit card on file if the business

Card Type

(Circle One)

Visa MasterCard
American Express Discover

Name on Card _____
Credit Card Number _____
Expiration Date _____
Security Code _____
Zip Code _____
Card Holder Signature _____

Automatic Charge Date

(Circle One)

1st 15th 28th

The undersigned members, as a condition of membership in El Dorado Golf & Country Club under its current promotion which expires _____, does hereby agree that if I should resign or otherwise terminate my membership, I agree to pay dues and food minimum charges for a minimum of twelve (12) months as a result of the joining fee being waived/reduced. In addition, and as a second condition of this promotion, I will sign an authorization to have my monthly charges automatically drafted from my bank account by filling out and signing the ACH authorization form.

I/WE AGREE TO ABIDE BY THE CONSTITUTION AND BY-LAWS OF THE EL DORADO GOLF & COUNTRY CLUB, INC. I UNDERSTAND THAT I AM RESPONSIBLE FOR MY DUES AND CHARGES:

If I fail to pay, it will be charged to my credit card account.

Applicant Signature _____
Member Sponsor Signature _____