

2018 Passholder Agreement

Please complete all fields so we can keep our records and contact information up to date. Thank you.

Passholder Name: _____

Name of Spouse: _____

Children & Age: _____

Address: _____

City, State: _____ ZIP CODE: _____

Phone: _____ Email: _____

<i>(Tax Included)</i>	Before March 1st	After March 1st	All Year
<u>Single</u>			
Golf	\$ 661.24 <input type="text"/>	\$ 687.96 <input type="text"/>	Student \$170 <input type="text"/>
Golf with Range	\$ 837.56 <input type="text"/>	\$ 871.42 <input type="text"/>	Student Range Only \$125 <input type="text"/>
Golf with Cart	\$ 1,180.78 <input type="text"/>	\$ 1,228.50 <input type="text"/>	Student & Range \$255 <input type="text"/>
Golf, Cart & Range	\$ 1,357.11 <input type="text"/>	\$ 1,411.96 <input type="text"/>	
<u>Single Under 29</u>			
Golf	\$ 562.05 <input type="text"/>	\$ 584.77 <input type="text"/>	<u>USGA GHIN Handica</u>
Golf with Range	\$ 711.93 <input type="text"/>	\$ 740.70 <input type="text"/>	Handicap Fee \$25 <input type="text"/>
Golf with Cart	\$ 1,003.67 <input type="text"/>	\$ 1,044.23 <input type="text"/>	<i>GHIN is not necessary for i</i>
Golf with Cart & Range	\$ 1,153.54 <input type="text"/>	\$ 1,200.16 <input type="text"/>	
<u>Family Under 29</u>			
Golf	\$ 771.71 <input type="text"/>	\$ 802.89 <input type="text"/>	<i>GHIN is needed to participate in and Pro Am events.</i>
Golf with Range	\$ 978.69 <input type="text"/>	\$ 1,018.24 <input type="text"/>	
Golf with Cart	\$ 1,323.05 <input type="text"/>	\$ 1,376.52 <input type="text"/>	
Golf with Cart & Range	\$ 1,530.03 <input type="text"/>	\$ 1,591.86 <input type="text"/>	
<u>Family</u>			
Golf	\$ 907.89 <input type="text"/>	\$ 944.58 <input type="text"/>	<u>Payment Options</u>
Golf with Range	\$ 1,151.40 <input type="text"/>	\$ 1,197.92 <input type="text"/>	
Golf with Cart	\$ 1,556.53 <input type="text"/>	\$ 1,619.44 <input type="text"/>	
Family Golf, Cart & Range	\$ 1,800.03 <input type="text"/>	\$ 1,872.78 <input type="text"/>	
Take Home Cart (Added to)	\$ 550.00 <input type="text"/>		Pay In Full \$ _____
			Monthly payment option
			be completed in person. Do not
			Monthly requires a contract t
			No Discount if choosing to pa
			Amount Paid \$ _____

Membership Received by: _____ ACCT Updated by: _____

Make sure to check out the back side of the form to see a few promot
notes that you can take advantage of.

p

league

n IGA, USGA

i must

send a check

to be filed.

y monthly

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