

2019 Passholder Agreement (Out of County)

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

Passholder Name: _____ Birth Date: _____

Name of Spouse: _____

Children & Age: _____

Address: _____

City, State: _____ ZIP CODE: _____

Phone: _____ Email: _____

<i>(Tax EXCLUDED)</i>	Before March 1st	After March 1st	All Year
<u>Single</u>			
Golf	\$ 350.00 <input type="checkbox"/>	\$ 362.50 <input type="checkbox"/>	Student \$170 <input type="checkbox"/>
Golf with Range	\$ 432.50 <input type="checkbox"/>	\$ 450.00 <input type="checkbox"/>	Student Range Only \$125 <input type="checkbox"/>
Golf with Cart	\$ 620.00 <input type="checkbox"/>	\$ 645.00 <input type="checkbox"/>	Student & Range \$255 <input type="checkbox"/>
Golf, Cart & Range	\$ 702.50 <input type="checkbox"/>	\$ 732.50 <input type="checkbox"/>	
<u>USGA GHIN Handicap</u>			
			Handicap Fee \$25 <input type="checkbox"/>
<i>GHIN is not necessary for league in 2019 We will be using a different system. GHIN is needed to participate in IGA, USGA and Pro Am events.</i>			
<u>Family</u>			
Golf	\$ 453.95 <input type="checkbox"/>	\$ 472.29 <input type="checkbox"/>	
Golf with Range	\$ 575.70 <input type="checkbox"/>	\$ 598.96 <input type="checkbox"/>	
Golf with Cart	\$ 778.27 <input type="checkbox"/>	\$ 809.72 <input type="checkbox"/>	
Family Golf, Cart & Range	\$ 900.02 <input type="checkbox"/>	\$ 936.39 <input type="checkbox"/>	

Payment Options

Pay In Full \$ _____

Amount Paid \$ _____

**Monthly payment option must
be completed in person. Do not send a check
Monthly requires a contract to be filed.
No Discount if choosing to pay monthly**

Membership Received by: _____ ACCT Updated by: _____