

APPLICATION FOR MEMBERSHIP





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Type of Membership Des.	ired		
Check One: ☐ Resident Family Golf ☐ Non-Resident Golf ☐ Single Golf ☐ Social Athletic	☐ Social D ☐ Racquet ☐ Junior G 21-29	Sports Golf: (circle age of oldest spouse)	
Personal Information			
Name in which membership will be held _			
Current Address	City	State	Zip Code
Length of Time at Current Address	, and the second		•
Home Phone			
Date of Birth			
☐ Single ☐ Married			
Spouse's Name	Spous	se's E-Mail Address	
Date of Birth			
Please list your dependent children.			
Name	Date of Birth	Male Female	
		_	
Business Information			
Applicant's Name of Company		Retired	
Business Address	City	State	Zip Code
Business Telephone Number			1
Years in Present Employment			
Spouse's Name of Company		_ 🗌 Retired	
Business Address	City	State	Zip Code
Business Telephone Number			*
Years in Present Employment			

Sponsor Information				
Please list membership in other clubs, fraternities or organizations and positions held				
I am acquainted with the following Riversi	ide Country Club Members:			
Name	for years.			
Name	for years.			
Payment				
Statement Delivery Options:	Payment Options:			
Mailed Paper Statement	ACH (Attach Form)			
☐ Email	Check			
Both	Credit Card (3.25% surcharge)			
	Debit			
Email Preferences				
Golf Racquet Sports Pool	☐ Social Events ☐ Kids Club			
ATITITODIZAT	IONIOE			
AUTHORIZAT	ION OF			
MEMBERSHIP —				
	at Riverside Country Club, I hereby authorize Riverside Country Club, through its acial condition, our family and professional background and specifically authorize porting organizations.			
	accept and understand that I have truthfully and to the best of my ability answered for membership is granted, I agree to observe and be bound by the By-Laws and Rules in the present form or as may be amended.			
In the event I default on my account, I acknowledge and court costs.	owledge and agree I will also be responsible for all 3rd party collection fees, legal fees			
-	I am personally liable and responsible for all financial obligations relating to my who will be utilizing Riverside Country Club.			

Date_

Date_

Signature of Applicant —

Signature of Spouse_