

2016 MEMBERSHIP APPLICATION



Golf

Pool

LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____
LOCAL ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
ALTERNATE ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
EMAIL: _____ PHONE: _____ DATE OF BIRTH: _____
EMPLOYER: _____
SPOUSE NAME: _____ SPOUSE EMPLOYER: _____
SPOUSE EMAIL: _____ SPOUSE PHONE: _____
SPOUSE DATE OF BIRTH: _____ ANNIVERSARY DATE: _____

Children Information

Please list names and birth dates of all children 22 years of age and under, living in your household.

NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____
NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____
NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____
NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____

I, the undersigned, hereby apply for membership at Winton Country Club and agree to remain a member for a period not less than twelve (12) months. I agree to provide a 90-day notice to Winton Country Club upon desire to terminate my membership. I agree to abide by the bylaws, house rules and other regulations of the Club covering my membership classification. It is understood that Club privileges shall be provisional until this application is submitted and approved by the Winton Country Club Board of Directors. Furthermore, I hereby agree to pay all charges within 30 days of the due date and understand there is a 3% charge for credit card payments.

SIGNATURE: _____ DATE: _____

TYPE OF CARD: VISA MASTER CARD DISCOVER

CREDIT CARD #: _____ EXPIRATION DATE: _____

NAME ON CARD: _____

I hereby authorize Winton Country Club to charge the indicated bank account or credit card. I agree this is either a one-time or recurring charge that will be made as indicated above. I understand that all account cancellations must be made in writing. Should any balances remain outstanding after the termination of the recurring payment, I agree to pay the balance via check, money order or wire. I will not dispute with my credit card issuer or bank any recurring billing of my credit card or bank account by Winton Country Club so long as the amount in question was for services rendered prior to the cancellation in writing of my account. I guarantee and warrant that I am the legal cardholder of this credit card or legal owner of this bank account and that I am legally authorized to enter into this agreement with Winton Country Club.

Member Type: (check one)

Junior: Young Family:
Young Individual: Family:
Individual: Social:

2016 Winton Country Club Member Fees:

Golf and social members receive complimentary access to the pool in season.

	Junior	Young Individual	Individual	Young Family	Family
Resident Golf	\$480	\$900	\$1,500	\$1,200	\$1,800
Non-Resident Golf	\$360	\$480	\$720	\$900	\$1,080
Seasonal Pool	\$100	\$200	\$295	\$395	\$495

Legend –

Family: Primary member is 35 yrs. or older, Two adults, plus children under 23 yrs old, living in same household.

Young Family: Primary member under 35 yrs old. Two adults, plus children under 23 yrs old, living in same household.

Individual: Primary member is 35 yrs or older.

Young Individual: Primary member is under 35 yrs old.

Junior: Primary member is 18 yrs old or younger.

Non-Resident: Primary residence 30 mi and greater from Winton, and living outside of Amherst or Nelson counties.

Note:

1. All member billing will be delivered electronically to the email address supplied by the primary member, or the responsible adult in the case of a junior member. If one desires a hard copy of their bill summary, please make the request during business hours at the office of the business manager (434-946-5860).
2. Please address your billing remit, or other correspondence to: Winton Country Club, 599 Patrick Henry Highway, Amherst, VA, 24521. Attention – Business Manager. Please add your member id to your check “For” section.