

MEMBERSHIP APPLICATION

Please check Golf Pool Range Ball Plan Family Individual No

Circle Category: Family (RES/NONRES) Young Family (RES/NONRES) Individual (RES/NONRES)

Young Individual (RES/NONRES) Junior (RES/NONRES) Social Family (RES/NONRES) Social Individual (RES/NONRES)

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 23 years of age and under.

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.

599 Patrick Henry Hwy. Amherst, VA 24521
434-946-7336 | www.wintoncountryclub.com

