

Carambola Golf Club / 2016 Membership Application

Name: _____ DOB ___/___/___ Spouse: _____ DOB ___/___/___

Children's Names: _____ DOB ___/___/___ Name: _____ DOB ___/___/___

E-mail address: _____ Spouse's E-mail: _____

Local Address: _____ Stateside Address: _____

Phones H: _____ W: _____ C: _____

All Memberships include social/Tennis memberships, range usage and club charging privileges

ANNUAL MEMBERSHIPS:

Individual Membership:

Regular: \$3,295 Paid in full \$865 Paid Quarterly \$365 -10 monthly payments

Age 80 & older and 40 & under \$ 2,200.00 Paid in full \$580 Paid Quarterly \$240 -10 monthly payments

Family Membership: (includes spouses, unmarried children under 18 years of age, & 21 if in school)

Regular: \$4,795 Paid in full \$1,260 Paid Quarterly \$525 -10 monthly payments

Age 80 & older and 40 & Under: \$ 3,200.00 Paid in full \$840 Paid Quarterly \$350 -10 monthly payments

Associate Membership: \$1,385 Paid in full \$750 -2 pmts (by 6/30) *\$60 cart/greens fee*

CORPORATE & SPECIAL GROUP MEMBERSHIPS AVAILABLE. PLEASE INQUIRE

ALTERNATE MEMBERSHIPS:

Seasonal Membership: \$1,800 Individual \$2,600 Family (good for any 4 consecutive months)

Monthly Membership: \$550 Individual \$750 Family

10% Discount on all membership types for SENIORS (65 or older)

Membership Fees \$ _____

Club Storage (No. of bags): _____ at \$125/bag \$ _____

Locker Rental (Qty): _____ at \$125/locker \$ _____

Both Club Storage & Locker (Qty): _____ at \$225 \$ _____

Total \$ _____

Terms-Read carefully before signing

Fees & Payment: All membership contracts with CGC include use of the pool, tennis courts and charging privileges. I understand that I am signing a 1-year contract and that CGC is extending the privilege of paying the year membership fee in installments. I understand that if I leave or otherwise discontinue the use of my membership. I am still obligated to make all monthly or quarterly payments through the remainder of the contract year. I hereby give my permission to Carambola to debit my credit card (below) on the first of each month all payments are made. Dues will be assessed each month or quarter regardless of whether I utilize the club facilities or not. I am also authorizing Carambola to debit my card for any other charges that I make at the club if I am more than 30 days late plus applicable late fees. I also agree that I and my family member lose playing privileges if my balance is unpaid for 90 days or exceeds \$2,500, whichever comes first.

_____ Initials

Code of Conduct: CGC has the right to terminate the membership of any member or ban from its property indefinitely, without compensation, anyone who conducts themselves in a way detrimental to the best interest of the club, its members and/or its guests and/or its employees, in the opinion of the management of the club. This includes but is not limited to possession of a firearm on Club property, acting in a threatening manner toward guests or staff, bringing a dog on the property or engaging in illegal activities. I do hereby agree to abide by all the rules, regulations and Code of Conduct of the CGC. _____ Initials

Carambola Cart & Liability Agreement: I represent that I am familiar with the operation of CGC golf carts and agree to return said cart at the end of play in as good condition as received excepting normal wear & tear. I agree to hold CGC free & harmless from any damages or claims arising from my use of said cart involving myself or any passengers, adult or child, and further agree to pay for all damages sustained while said cart is in my possession. I further represent that I am over 16 years of age. Additionally, I agree to release and hold harmless CGC from any and all liability for injuries while using CGC facilities and participating in its events. _____ Initials

CREDIT CARD INFORMATION – MANDATORY for Installment plans and/or Charging Privileges

Credit Card Type: **MasterCard VISA AMEX** Acct#: _____ Exp Date: ___/___/_____

Authorized Signature: _____ **Date:** _____