

Membership Application

	Application must be approved by Membership committee			
Moses Lake GOLF CLUB	Application must be approved by Membership committee APPROVED BY			
	Membership Type			
Family MemberSir	ngle MemberFami	ly Junior Member	Junior Member	
Senior Member(70+)	Corporate Member:	SingleFamily	Non-Resident	
Applicant Information				
Last Name Fir	st Name	Date of Birth		
Spouse		Date of Birth		
Home Address				
City		State	Zip	
Telephone Number		Office/Cell Number		
Email Address				
Employer				
Office Address				
Emergency Contact Name		Telephone Number	•	
Dependents (Under Age 21, Living	at Home or Full Time Student)			
Name		Date of Birth		
Name		Date of Birth		
Name				
General Rules I acknowledge that I understand that the continuited to golf carts, clubs, etc. left on tinsurance. Further I agree to make no claim of 1.5% per month. By signing below, I her credit history and to obtain such informatio Payment of account will be due on or ne credit card information to office. Moses my account. I agree to pay all actual attorm Membership resignation MUST be sen card remains the Club's property at all nation.	the premises, and that any prot in for any loss. I acknowledge the reby apply for membership at M in, as the club feels appropriate that the 15th of each month parallel Lake Golf Club may suspend my in the Moses Later to the Moses Later in writing to the Moses in writing in writi	ection on said property: nat past due accounts w loses Lake Golf Club and , to extend credit to me id by <u>Auto Payment</u> . M y membership privileges t is turned over for colle like Golf Club business	should be provided by my own ill be assessed a finance charge d authorize the Club to check my under my Club account. Member will provide debit or due to a delinquent amount on action. s office. The membership	



Member Nar	ne			
Member #		Type		
Account Balance we month. Moses La	vill be automa ke Golf Club m	yment on Credi tically charged to your nay assess late charge he business office can	credit card on or residence on accounts that	have a declined and/
Payment of	f Membe	rship Account		
Card Type:	Visa	MasterCard	dAme	rican Express
Name on Credit Car	d	Cr	redit Card Number	Exp Date
Card Holder Signatu	ıre	Da	ate	
		e my credit card o e slip with my sta		