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WSCC Golf Membership Application

Name _____ Age _____ Date of Birth _____
 Home Address _____
 Home Phone _____ Cell Phone _____ Work Phone _____
 E-mail _____ Years lived in Wilson _____
 Employer _____ Position Held _____ Date Employed _____

Type of Membership desired:

_____ Full Family (*spouse & dependants*)
 _____ Full Single (*one person only*)
 _____ Full Non- Resident (*separated by one county*)
 _____ Full Junior (*18 yrs. or younger*)

Please add annual fees to my membership:

_____ \$300 Family Range Club
 _____ \$200 Single Range Club
 _____ \$20 Handicap Fee (*how many? _____*)
 _____ \$60 Locker (*how many? _____*)

Qualifying Members (*must be spouse or dependant children age 22 or younger*)

Spouse _____ Age _____
 Child _____ Age _____
 Child _____ Age _____
 Child _____ Age _____
 Child _____ Age _____

Authorization Agreement for Automatic Debits

(Preauthorized Bill Payments)

I hereby authorize Willow Springs Country Club to draft the account below monthly for any charges that have been incurred on my membership account. The draft will take place on the first business day of each month.

Bank Draft:

Name listed on Bank Account _____ Bank Name _____

Routing # _____ Account # _____

**Must include a VOIDED CHECK.*

-OR-

Credit Card Draft:

Name listed on Credit Card _____ Please circle: Master card/Visa/ AMEX/ Discover

Credit Card # _____ Exp. Date: _____

SIGNATURE _____

DATE _____

WSCC Membership Contract

I _____ joined Willow Springs Country Club under the classification of
(New Member's Name)
a _____ membership. Willow Springs Country Club has agreed
(Family, Single, Non-Resident)
to waive the initiation fee in the amount of \$_____ upon the following conditions:

1. I agree to have my monthly dues plus any additional charges that I incur on my membership account drafted from my most current bank account or credit card between the 1st and the 5th of each month.
2. I agree to 12 months of membership beginning on _____.
3. I understand that Willow Springs Country Club will continue to draft from my most current bank account or credit card between the 1st and the 5th of each month for membership dues plus any additional monthly charges unless I send *written* notice of Cancellation after contract is fulfilled should I decide at that time to cancel my membership. WSCC must be notified before the 1st of the month of Cancellation to avoid monthly dues charge.
4. I understand that it is my responsibility to immediately notify Willow Springs Country Club should any changes take place to my draft or credit card information that I have given them.
5. I understand that the *only* circumstances that would release me from this contract is in the event that I have to leave the area for active military purposes or in the event of my own death. It is my understanding that should I withdraw my membership for any other reason before this contract expires; I am obligated to pay half of the original initiation fee according to the WSCC by-laws.

Family \$400 (half of \$800)
Single \$200 (half of \$400)
Non-Resident \$150 (half of \$300)

6. I have read and understand the Willow Springs Country Club by-laws as they apply to me.

Attached to this contract is my membership application including all draft information along with my first month's dues in the amount of \$_____.

New Member's Name (Printed)

Date

New Member's Signature

Date

Signature of Owner/President
of Willow Springs Country Club

Date