

FALLING CREEK GOLF COURSE INC.

2359 Falling Creek Road
Kinston, NC 28504

APPLICATION FOR MEMBERSHIP

Name _____ Date _____

Address _____

City/State/Zip _____

Phone# _____ Home _____ Cell _____

E-mail Address _____ Date of Birthdate _____

I hereby apply for membership at Falling Creek Country Club subject to the approval by the owners. I agree to abide by the rules and regulations of the club. Failure to abide by the rules and regulations of the club may result in suspension or termination. Currently, there is an initiation fee of \$300 which is to paid on the day that you join OR you may agree to keep your membership for 24 months by signing your initials here _____.

___ Junior Full Membership Under age of 30/Birthdate _____

___ Full Membership

2 Ways to Pay Dues

___ Bank Draft: I agree to have my dues of \$120 for Full Membership or \$85 for Junior Membership drafted from my bank account on the 9th of each month.

___ Cash or Check: I agree to pay monthly dues by cash or check on or before the 10th of the month

If for any reason I decide to terminate my membership, I must submit a written notice to the club.

Signature of Applicant _____

Spouse's Name _____

Dependents

Name _____ Relationship _____ Date of Birth _____

Name _____ Relationship _____ Date of Birth _____

Name _____ Relationship _____ Date of Birth _____

Name _____ Relationship _____ Date of Birth _____

Approved _____