

Application for Membership

Bellefonte Country Club

TO THE BOARD OF DIRECTORS:

I wish to apply as a candidate for **Family** or **Individual** (please circle one) Membership at Bellefonte Country Club.

The type of Membership I am applying for is (please check one):

Personal Corporate Heritage Non Resident Regional

The category of Membership I am applying for is (please check one):

Full Family Membership Individual Full Family Social Individual Social Family Clubhouse
 Individual Clubhouse

Denote Area of Membership Silver (21 – 35 yrs.) Gold (36 – 69 yrs.) Platinum (70 & up)

Name (Primary Member) _____ Spouse's Name _____

Date of Birth _____ Spouse's Date of Birth _____

Social Security Number _____ Spouse's Social Security Number _____

Residence Street Address _____

City, State, Zip Code _____

Home Phone () _____ Cell Phone () _____ Fax () _____

Email address(s) where you wish to receive Club correspondence (please list no more than two):

_____ / _____

Profession / Occupation _____

Employer _____

Business Street Address _____

City, State, Zip Code _____

Business Phone () _____ Business Fax () _____

Spouse's Profession / Occupation _____

Employer _____

Business Street Address _____

City, State, Zip Code _____

Business Phone () _____ Cell () _____ Fax () _____

(Please complete both sides of application- Thank you!)

*208 Country Club Drive, Post Office Box 1875
Ashland, Kentucky 41105-1875
Phone: 606.324.2107 Fax: 606.324.0069*

Application for Membership

Bellefonte Country Club

Please list activities of interest / hobbies for yourself:

Please list activities of interest / hobbies for your Spouse:

Please list children name(s), date of birth(s), and interest in Club activities:

Name	Birth Date	Activities / Interests / Hobbies
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
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Club References:

Please list the names of current Members whom you would like to be contacted regarding endorsement of your application for membership (two are required to complete application):

Name	Years Acquainted	Nature of Acquaintance
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Sponsoring Member: _____

Committee Service:

The Club offers members committee service opportunities in different areas of interest; Finance, Membership, Golf, Grounds, House, Pool, Tennis, & Entertainment. If you are interested in serving on a committee please indicate your area of interest. Thank you!

I understand that my application for membership is subject to approval by the **Board of Directors of Bellefonte Country Club** and that all information requested within this application is required for consideration. I agree that this information may be used to determine my eligibility and authorize reference and credit checks. I understand that payment of an Initiation Fee is required upon acceptance and billing of monthly dues and related fees will begin upon activation of membership. All Dues and Fees are taxable and are non-refundable. By my signature, I agree to conform to and be bound by the Articles, Bylaws, Rules and Regulations of the Bellefonte Country Club and agree to pay monthly statements within thirty (30) days of receipt, failure to do so will result in legal action for which I will be liable to pay all costs and fees of collection including attorney fees.

Signature _____ Date _____

Spouse's Signature _____ Date _____