

Winter Application

APPLICANT'S NAME: _____

SPOUSE [IF APPLICABLE]: _____

DRIVER'S LICENSE: _____
[NUMBER] [EXP. DATE] [STATE]

DRIVER'S LICENSE: _____
[NUMBER] [EXP. DATE] [STATE]

DATE OF BIRTH: _____
[APPLICANT] [SPOUSE]

ADDRESS: _____
NO. & STREET CITY AZ ZIPCODE

CELL PHONE: _____
[APPLICANT] [SPOUSE]

EMAIL: _____
[APPLICANT] [SPOUSE]

CREDIT CARD: _____
[ACCT. NUMBER] [EXP. DATE]

CHILDREN UNDER 22 YEARS OF AGE NAME & DATE OF BIRTH [IF APPLICABLE]

MEMBERSHIP CATEGORY DESIRED: NOV. - APRIL _____ SINGLE OR FAMILY
1 TIME TRIAL MEMBERSHIP; NOT RENEWABLE

FOR SUCH MEMBERSHIP LISTED ABOVE, I HEREBY REMIT TO ALTA MESA GOLF CLUB MY NON-REFUNDABLE INITIATION FEE OF **\$4,500 FAMILY/\$3,500 SINGLE**. I UNDERSTAND THAT MY APPLICATION FOR MEMBERSHIP CONFERS NO RIGHT OF OWNERSHIP IN ANY PROPERTY OR ASSET OF AMCC, INC., AND THAT I WILL NOT BE ENTITLED TO VOTE IN THE AFFAIRS OF, OR HOLD OFFICE IN, AMCC, INC. AT ANY TIME SHOULD MY ACCOUNT BECOME DELINQUENT, AS DEFINED IN THE BY-LAWS, ALTA MESA GOLF CLUB, AT THEIR DISCRETION, HAS MY PERMISSION TO CHARGE MY CREDIT CARD ON FILE, ANY BALANCE DUE. I HEREBY AUTHORIZE AMCC, INC. TO CHECK ANY REFERENCES GIVEN, INCLUDING A CREDIT REPORT, AND RECEIVE FROM ANY SOURCE ANY INFORMATION ABOUT ME. I HEREBY APPLY FOR MEMBERSHIP AT ALTA MESA GOLF CLUB (FOR A NON-EQUITY MEMBERSHIP). I ACKNOWLEDGE RECEIPT OF THE BY-LAWS AND RULES & REGULATIONS AND AGREE TO ABIDE BY THE BY-LAWS, AND RULES & REGULATIONS AS THEY MAY BE AMENDED FROM TIME TO TIME. IF THIS APPLICATION IS REJECTED BY AMCC, INC., ALL FUNDS, MINUS CHARGES INCURRED, SHALL BE IMMEDIATELY REFUNDED, AND THIS AGREEMENT SHALL BE CANCELLED.

[Applicant's Signature]

[Date]

Accepted this ____ day of _____, 20____

Member Acct. # _____

Membership Committee Chairperson