

Pinehaven Country Club

APPLICATION FOR MEMBERSHIP

P.O. Box 567 (1151 Siver Rd.)
Guilderland, NY 12084

(518) 456-7111

Category:

- | | |
|--------------------------------------|---|
| (1) Family Over 35* _____ | (9) Single Over 35 _____ |
| (2) Family Dual Prim. Over 35* _____ | (13) Single Over 35 w/ fam. Pool _____ |
| (7) Family Under 35* _____ | (12) Single Under 35 _____ |
| (8) Family Prim/Prim Under 35* _____ | (14) Single Under 35 w/ fam. Pool _____ |

*** Eldest of the Applicants**

**Note: All applicants for under 35
Categories must provide proof of age**

APPLICANT (Primary) _____ Date of birth _____

Home Address _____ Home Tel. No. _____

City _____ State _____ Zip _____ E-mail address _____

Occupation _____

Employed By _____

Business Address _____ Bus. Tel. No. _____

City _____ State _____ Zip _____

FAMILY MEMBERSHIP (Please Complete Only if Applying for Family Membership, or Single with family Pool)

Spouse (Non-Primary) _____ Date of birth _____

Spouse Bus. Tel. No. _____

Children: (Names and Dates of Birth)

_____ DOB _____ DOB _____

_____ DOB _____ DOB _____

.....
(To Be Completed by All Applicants)
NAMES AND ADDRESSES OF TWO REFERENCES:

PINEHAVEN MEMBER SPONSOR (*Just ONE Please*) _____

Other Golf/ Country/ Athletic Clubs in which membership has been held;

Presently Have an Established Golf Handicap? _____ GHIN No. _____ Handicap _____

In Emergency, Please Notify: _____ Tel. No. _____

Payment Accompanying Application: For Initiation Fee _____ For Dues _____

NOTE: In a Family Membership, the Primary Member has unrestricted access to the Golf Course; restrictions apply for a Non-Primary Member for tee times on Weekends and Holidays.

THE REVERSE SIDE OF THIS APPLICATION MUST ALSO BE COMPLETED

APPLICATION FOR MEMBERSHIP

APPLICANT _____

Applying for Membership As: (1) Family Over 35* _____ (9) Single Over 35 _____
 (2) Family Dual Prim. Over 35* _____ (13) Single Over 35 w/ fam. Pool _____
 (7) Family Under 35* _____ (12) Single Under 35 _____
 (8) Family Prim/Prim Under 35* _____ (14) Single Under 35 w/ fam. Pool _____

*** Eldest of the Applicants**

**Note: All applicants for under 35
 Categories must provide proof of age**

I hereby apply for membership in the Pinehaven Country Club Inc., and if accepted, agree to conform to and be bound by the Rules and Regulations of the Club in effect at any time applicable to the category of membership for which I am applying herewith. I understand that the membership year begins on November 1st and ends on October 31st.

If this application is approved by the Board of Directors, it is agreed that I will be entitled to all the benefits and privileges of such membership. If this application is not approved by the Board of Directors, all monies paid by me in accompaniment of this application shall be returned to me immediately, and this agreement shall have no force.

It is further understood and agreed that I am responsible for the appropriate minimum monthly restaurant tab and that I will pay all charges incurred by me, members of my family, and my guests. It is also agreed that membership does not confer on me any ownership of or any interest in Pinehaven Country Club Inc.

I further agree that my family, my guests, and I will abide by and adhere to all Rules, Regulations, and By-laws of the Club in effect now or at any future time.

I understand and agree that there may be an initiation fee in connection with an application for membership in Pinehaven Country Club Inc., and that if I elect the option of paying such initiation fee in installments, I remain obligated for the full initiation fee, even though my membership might terminate prior to the conclusion of the period over which the installments are to be paid.

I understand that the full initiation fee in force at this time of this application is \$ _____, and that arrangements can be made for payment in installments. I understand that installments require additional carrying charges. I further understand that the full annual dues for the category of membership for which I am applying are \$ _____ per year.

Included with this Application for Membership is a check, money order, or other funds for the following:

Initiation Fee: \$ _____
 Dues for (year) _____: _____
 Total Enclosed: \$ _____

Falsification of data entered with this application is grounds for termination of membership.

 Date of Application

 Signature of Applicant

Accepted by Pinehaven Country Club Inc.

By: _____

Date: _____

When Completed, this Application and the accompanying payment should be sent to :

**Pinehaven Country Club
 P.O. Box 567
 Guilderland, NY 12084**