



Gillette Golf Club

Membership Application



Application Information

Primary Member Name:		Date:
Phone:	Cell:	DOB:
Mailing Address:		
City:	State:	Zip Code:
<u>E-mail:</u>		

Couple/Family Information (If Applicable)

*Family includes spouse and children under 21 and living at home

Spouse Name:	DOB:
Child Name (1):	DOB:
Child Name (2):	DOB:
Child Name (3):	DOB:
Child Name (4):	DOB:

Annual Membership Type (Please Circle)

*Single - \$500 *Couples- \$675 *Family- \$725 Junior - \$110 College - \$210

*\$50 discount for Joint Membership with Bell Nob

** Monthly payment options available. Please see manager for details.

Annual Cart Services (Please Circle)

Single Cart Pass - \$475 Couples Cart Pass- \$700 Family Cart Pass- \$775

*Couples cart pass includes 2 seats – Family Cart Pass includes up to 4 seats

Private Cart Trail Fee - \$400

On Site Private Cart Storage - \$75

Handicap - \$35 GHIN# _____

TOTAL: _____

Method of Payment:

Date Payment Received:

Payment Amount:

Received by:

By filling out an application for membership at the Gillette Golf Club, you agree to the posted terms and conditions of membership.

Signature of Applicant:

