

**Klinger Lake Country Club**  
**MEMBERSHIP APPLICATION**

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Full Name (Please Print): \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Marital Status: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Summer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Summer Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_ Bus. Ph: \_\_\_\_\_

Bus. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please list dependent children (defined in the bylaws as taxable dependents)

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Please Circle  
Male Female

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male Female

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male Female

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male Female

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male Female

Send billing and correspondence to: \_\_\_\_\_ Home Address or \_\_\_\_\_ Business Address

I hereby submit my application for membership in the following membership classification and if accepted, I will abide by all the policies and bylaws of Klinger Lake Country Club.

***Please Circle Choice(s)***

*Fully Inclusive   Full Family   Golf Couples   Golf Individual   Sr. Associate   Jr. Associate*

*Social   Pool/Dining   Dining*

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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Amount paid w/app: \_\_\_\_\_ Ck #: \_\_\_\_\_ Date of join: \_\_\_\_\_

Dues (circle):   Annual   Monthly

Date approved by BOD: \_\_\_\_\_ Membership Number: \_\_\_\_\_

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