

FALLING CREEK GOLF COURSE INC.

2359 Falling Creek Road
Kinston, NC 28504

APPLICATION FOR MEMBERSHIP

Name _____ Date _____

Address _____

City/State/Zip _____

Phone# _____ Home _____ Cell _____

E-mail Address _____

I hereby apply for membership at Falling Creek Country Club subject to the approval by the Pro and the owners. I agree to abide by the rules and regulations of the club. Failure to abide by the rules and regulations of the club may result in suspension or termination.

Junior Full Membership Under age of 30/Birthdate _____

Full Membership

2 Ways to Pay Dues

Bank Draft: I agree to have my dues of \$100 for Full Membership or \$70 for Junior Membership drafted from my bank account on the 9th of each month.

Cash or Check: I agree to pay monthly dues of \$110 a month by cash or check. If my dues are paid on or before the 10th of the month, I pay \$100.

If for any reason I decide to terminate my membership, I must submit a written notice to the club.

Signature of Applicant _____

Spouse's Name _____

Dependents

Name _____ Relationship _____ Date of Birth _____

Name _____ Relationship _____ Date of Birth _____

Name _____ Relationship _____ Date of Birth _____



Name _____ Relationship _____ Date of Birth _____