

FOR OFFICE USE ONLY	
Date Received	Amount Received
Primary Member No	Spouse Member No
Locker No	Locker No
Bag Room No	Bag Room No

2024 APPLICATION FOR MEMBERSHIP

APPLICANT INFORMATION NAME ADDRESS PHONE NUMBER DATE OF BIRTH EMAIL ADDRESS MEMBERSHIPS AND ADD ONS ____ 1ST & 2ND YEAR MEMBERSHIP (AGES 41 & OVER) \$1,100 ____ YEARS 1 THRU 3 SPOUSE ADD-ON \$600 3RD YEAR REGULAR MEMBERSHIP (AGES 41 & OVER) \$1.300 REGULAR MEMBERSHIP (AGES 41 & OVER) \$2,000 REGULAR SPOUSE ADD-ON \$900 ____ *NEW* CART MEMBERSHIP \$1.100 YOUNG PROFESSIONAL MEMBERSHIP (AGES 18-40) \$1.000 COLLEGE MEMBERSHIP (MUST BE ENROLLED FULL TIME) \$500 ____ JUNIOR MEMBERSHIP (AGES 13-17) \$250 (KIDS 12 & UNDER ARE FREE WITH PARENT MEMBER) SOCIAL (POOL/PICKLE BALL/BOCCE) \$120 SOCIAL FAMILY \$210 (SAME HOUSEHOLD) PICKLE BALL ONLY \$25 DIRECT WITHDRAWAL AUTHORIZATION AGREEMENT YES I AGREE THAT IN ORDER TO OPEN A TAB OR CHARGE TO MY ACCOUNT THAT I WILL PROVIDE NO WANANGO CC WITH MY CREDIT CARD OR BANK ACCOUNT TO WITHDRAW FOR MY PREVIOUS MONTH'S CHARGES.

CLUB MEMBER'S SIGNATURE DATE



MONTHLY CREDIT CARD/ACH PAYMENT FORM DIRECT WITHDRAWAL AUTHORIZATION AGREEMENT

I,	, HEREBY AUTHORIZE WANANGO COUNTRY CLUB TO AUTOMATICAL RD / BANK ACCOUNT ON THE 5TH DAY OF EVERY MONTH FOR THE	LY
PREVIOUS MONTH'S CHARGES TO M		
	<u>OPTION 1</u> :	
CARD NUMBER		_
EXPIRATION DATE	CVV NUMBER	
CARDHOLDER'S NAME		
BILLING ADDRESS		
ALL CREDIT CARD CHARGES WILL	INCUR A 3% PROCESSING FEE	
	OPTION 2:	
BANK ACCOUNT NUMBER		
ROUTING NUMBER		
NAME ON ACCOUNT		
NO PROCESSING FEE FOR ACH TRA	NSACTIONS	
IF FOR ANY REASON I DEFAULT ON COLLECTION EXPENSES INCURRED	THIS AGREEMENT, I SHALL BE RESPONSIBLE FOR ALL LEGAL AND/OBY WANANGO COUNTRY CLUB TO COLLECT THE BALANCE DUE.	ЭR
SIGNATURE:	D&TF:	