



FOR OFFICE USE ONLY

Date Received by Club _____ Amount Received _____
 Effective Date of Membership _____ Staff Initials _____

Primary Member No. _____ Spouse Member No. _____
 Locker No. _____ Locker No. _____
 Bag Room No. _____ Bag Room No. _____

WANANGO COUNTRY CLUB

Application for Membership

Personal Information

Primary Member's Name: _____

Title
First
M.I.
Last
Preferred Name

Home Address: _____

Street
City
State
Zip Code

Home Phone Number: _____ Cell Phone Number: _____

Date of Birth: _____

E-mail Address: _____

Spouse's Name: _____

Title
First
M.I.
Last
Preferred Name

Cell Phone Number: _____ Date of Birth: _____

E-mail Address: _____

Type of Membership Desired

- 1st & 2nd Year Regular Member (ages 41 & over) - \$960/\$480
- 3rd Year Regular Member (ages 41 & over) - \$1,200/\$600
- Regular Member (ages 41 & over) - \$1800/\$720
- Ladies' League (Tuesday Only) - \$420
- Young Professional Member (ages 18-40) - \$840/\$450
- College Student Member - \$480
- Social Member - (1)\$240 (2nd)\$120
- Pickle Ball/ Bocce Only \$50
- Non-Resident Member - \$720/\$480
- Teacher Member - \$700/\$375
- Junior Member (ages 13 - 17) - \$240
- GHIN - \$50
- Locker - \$35
- Storage - \$75
- Locker-Storage Combo - \$100

Children

The member's dependent children ages 12 and under are free with parent member.

1. _____ male female

First
Last
Preferred Name
Date of Birth

2. _____ male female

First
Last
Preferred Name
Date of Birth

Affiliations

Are you a prior or current member of Wanango Country Club? Yes No If so, when? _____

Direct Withdrawal Authorization Agreement: I give authorization to Wanango Country Club to automatically debit my Credit Card or Bank Account for my previous month's charges. YES or NO

SIGNATURE: _____ DATE: _____



Wanango Country Club

Monthly Credit Card / ACH Payment Form
Direct Withdrawal Authorization Agreement

I, _____, HEREBY GIVE AUTHORIZATION TO
WANANGO COUNTRY CLUB TO AUTOMATICALLY DEBIT MY **Credit Card or
Bank Account** (Circle 1 Option), ON THE 5TH DAY MONTH FOR THE PREVIOUS
MONTH'S CHARGES TO MY MEMBER ACCOUNT.

Option 1:

Card Number _____

Expiration Date: ____/____ CVV# _____

Cardholder's Name: _____

Billing Address: _____

Option 2:

Bank Account Number _____

Routing Number _____

Name on Account _____

If for any reason I default on this agreement, I shall be responsible for all legal and / or collection expenses incurred by Wanango Country Club to collect the balance due. All credit card charges will incur a 3% processing fee. ACH payments will incur a NO fee.

Signature: _____ Date: _____