

TERRACE HILL GOLF COURSE

terracehillgolf@gmail.com

847.658.4653

PO Box 7777

Algonquin, IL 60102

PRIVATE CLUB

APPLICATION FOR NON-VOTING MEMBERSHIP

I, herewith, tender my application for membership in the Terrace Hill Golf Course Club. I further agree to abide by and be governed by the by-laws, rules, and regulations governing golf course activities. I understand that failure to abide by the course rules will lead to loss of membership. I further agree to pay the designated fee for playing golf on the course furnished by the club. It is understood that there are no compulsory dues or other fees except for this annual membership fee and the fee for each round of golf.

PLEASE MARK ONE ONLY:

\$250 Weekday/Individual

\$300 Full/Individual

\$300 Weekday/Family

\$375 Full/Family

****SIGN-UP FOR FAMILY MEMBERSHIP TO AVOID
GUEST FEES FOR SPOUSE****

PRINT NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ *E-MAIL ADDRESS* _____

****FOR FAMILY MEMBERSHIP:*** SPOUSE'S NAME _____ *

NAMES & AGES OF CHILDREN UNDER 19 (**Under 16 golfs with Adult Member Only**):

PAYMENT TYPE: CASH _____ CHECK _____ VISA _____ MASTER CARD _____

CREDIT CARD # _____ EXP. DATE _____ CVV# _____

\$ _____ **2019 Membership Fee Enclosed**

SIGNATURE REQUIRED _____ **Date** _____