



## Membership Application and Agreement

I hereby make application to Cherry Blossom Golf & Country Club (the club) to become a Club Member and agree to abide by the Rules of the club as they may be amended as the ownership deem necessary. In the event that my application is not accepted, any sums paid to the club with this membership application shall be immediately refunded. I hereby authorize the club to verify the references listed below. I understand that I am assuming no liabilities whatsoever in connection with the club other than the payment on the balance, if any, of the enrollment fee, the applicable membership dues and charges incurred by me, my family and guests in the use of the club. Please enter my name on the membership roster as follows.

Member's name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ S.S.N. # \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ S.S.N# \_\_\_\_\_

Home address: \_\_\_\_\_  
Street City State Zip Code

Business address: \_\_\_\_\_  
Street City State Zip Code

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Please direct my monthly statements and club correspondence to my: \_\_\_\_\_ Home \_\_\_\_\_ Business

Dependents: (24 years and under that are still in school)

\_\_\_\_\_ D.O.B. \_\_\_\_\_ Charging Privileges \_\_\_\_\_

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\_\_\_\_\_ D.O.B. \_\_\_\_\_ Charging Privileges \_\_\_\_\_

Other non-immediate family members that are allowed charging privileges:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>I am applying for:</b>	<b>Enrollment Fee</b>	<b>Dues</b>
_____ Full Privilege Family	\$500.00	\$245.00
_____ Full Privilege Single	\$375.00	\$210.00
_____ Golf Only – Family	\$200.00	\$215.00
_____ Golf Only – Single	\$150.00	\$185.00
_____ Social Membership	\$ 50.00	\$500.00 Annual
_____ Corporate	\$500.00	Applicable Dues
_____ Associate Membership	\$300.00	\$25.00 Per round (No Weekends)
_____ Junior Member 16- 24	\$150.00	\$150.00
_____ Driving Range – Family	\$400.00 Annual	
_____ Driving Range - Single	\$300.00 Annual	
_____ Cart Trail Single (Residents Only)*	\$595.00 Annual	
_____ Cart Trail Family (Residents Only) *	\$695.00 Annual	

**PAYMENT OF DUES, FEES, AND CHARGES**

I hereby acknowledge that all dues, fees, and charges for food, beverage, merchandise and services of Cherry Blossom Golf Club, LLC. (the “Club”) which is not paid in cash, will be charged either to my credit card or Club account. Each member is required to keep an active credit card on file with Cherry Blossom Golf Club.

Please select either Option 1 or Option 2, as provided below.

**Option 1:**                    (    )    Please bill my Club account, only keep my credit card on file to use if I don't pay by the 10th of each month. I understand that payment shall be due upon receipt each month and that my Club account shall be considered delinquent if not paid by the 10<sup>th</sup> of each month and subject to three (3%) late charge per month from the date of the monthly statement until paid in full. The credit card on file shall only be used to charge for payment of account balance if payment is not received by the 10th. Cherry Blossom Golf Club agrees to notify the cardholder by email if this action is necessary. I acknowledge that the Club may take whatever action it deems necessary to affect collection, including without limitations, suspension or termination of my membership or legal action, and the member shall be liable for all costs and for any expenses of such legal action and reasonable attorneys’ fees, including fees required in connection with appellate proceedings.

**Option 2:**                    (    )    Please bill my credit card each month  
I authorize any and all charges incurred on my account with the Club to be charged to the credit card listed below on the first of each month. I certify that the below card is issued to me and agree that all disputes on my credit card account in relation to the Club will be promptly brought to the Club’s attention. I understand that I am obligated to keep a valid, approved credit card on file with the Club at all times.

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

\* Trail Fees are for the use of a cart on the golf course to be renewed January 1 of each year. (Not Pro-Rated)

\* \_\_\_\_\_ I understand that I am responsible for the entire twelve month commitment, should I leave the club within one year of my anniversary date I am responsible for the remainder of my dues and minimums.

Cherry Blossom Golf & Country Club accepts the forgoing application and invites the applicant to become a Club Member on the terms and conditions contained in the Club Rules and Policies and the terms and conditions contained herein.

Applicant’s signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agent of the club: \_\_\_\_\_ Date: \_\_\_\_\_

Member Number # \_\_\_\_\_

Cherry Blossom Golf Club, LLC  
reserves the right to refuse membership to anyone that the club deems necessary.

**CREDIT CARD INFORMATION**

Credit Card Type: \_\_\_\_\_  
Visa, Master Card or Discover Card only .

Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVS Code \_\_\_\_\_

Cardholder's signature: \_\_\_\_\_

Address linked to card:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

In the event a Member desires to resign or make any changes to the membership, the process will be handled as follows:

Member must give a thirty (30) day written notice of intent to resign.

Member must give a thirty (30) day written notice of any changes.

Member is obligated to pay monthly dues through that thirty (30) day period.

A membership terminated by the Club for disciplinary cause shall be deemed resigned.