

KING CARTER GOLF CLUB

MEMBERSHIP APPLICATION

CONTACT INFORMATION				
Name:		D.O.B.:		
Address:		·		
City:	State:	Zip:		
Home Phone:	Mobile Phone:			
Email Address:				
Current Employer:				
Employer's Address:				
Employer City:	State:	Zip:		
Referred By: Please list 1 source				

FAMILY MEMBERSHIPS			
Spouse:		D.O.B.:	
Child 1:	Child 2:	Child 3:	
D.O.B.:	D.O.B.:	D.O.B.:	

MEMBERSHIP CATEGORY		
Individua	\square \$142 per month	
Family ¹	\square \$214 per month	

¹Family Memberships – includes the legal spouse of the Member who is living in the Member's home and unmarried children who are under the age of 23 and either living in the Member's home or attending school on a full-time basis.

CREDIT CARD EZ-PAY					
King Carter Golf Club is authorized to charge the following credit card account for monthly dues and purchases made by the member including any appropriate late fees					
		□ Master Card	□ Discover		
Card Number:			Exp. Date:		

PLEASE READ AND SIGN BACK OF APPLICATION

APPLICATION FOR MEMBERSHIP PRIVILEGES

The undersigned hereby makes application for a Membership at King Carter Golf Club. The undersigned understands that this membership allows all the advantages and benefits of a full membership for the monthly dues amount of \$142 for an Individual or Family dues of \$214.

MEMBERSHIP PRIVILEGES AT KING CARTER GOLF CLUB NO OWNERSHIP INTEREST IN THE CLUB OR THE CLUB FACILITIES

The undersigned hereby acknowledges and understands that King Carter LLC, a Virginia corporation, will own the facilities provided at King Carter Golf Club (the" Club"). The undersigned further acknowledges that membership at King Carter Golf Club permits the undersigned to use the facilities, but is not an investment in the Club or the facilities provided at King Carter Golf Club, nor does membership confer on the undersigned any equity or ownership interest or any other property interest in the Club or the facilities provided at King Carter Golf Club. Membership does not grant to the undersigned a vested or prescriptive right or easement to use the facilities provided at King Carter Golf Club. The undersigned only obtains a non-exclusive revocable license to use the facilities provided at King Carter Golf Club in accordance with the terms and conditions of the Membership Plan, as it may be amended from time to time. The undersigned acknowledges that any fees set forth above are non-refundable.

PAYMENT OF CLUB MEMBERSHIP ACCOUNT

All fees and other Club charges to the Member's Account will be billed monthly and shall be due upon receipt and shall be deemed delinquent if not paid by the 25th day of the month in which the statement was mailed. The undersigned hereby agrees to pay all dues, fees and other charges incurred by the undersigned and their guests and to pay the Club account when due. Past due bills will incur a late fee each month in an amount established by the Club from time to time. The undersigned further agrees to pay all reasonable attorneys' fees, investigation fees and other costs incurred in connection with the collection of delinquent accounts.

QUALIFICATIONS FOR MEMBERSHIP

By signing this Application for Membership Privileges, the undersigned acknowledges that the above information is true and correct and hereby authorizes King Carter Golf Club and its representatives to conduct such inquiry into the undersigned's qualifications for membership as they deem appropriate.

MEMBERSHIP APPROVAL PROCESS

The undersigned understands that any membership at King Carter Golf Club is subject to approval. In the event this Application for Membership Privileges is acted upon favorably, King Carter Golf Club will so notify the undersigned immediately and invite the applicant to membership. If this Application for Membership Privileges is not acted upon favorably, King Carter Golf Club shall notify the undersigned that he/she will not be invited to membership.

MEMBERSHIP PLAN AND RULES AND REGULATIONS

If invited to membership, the undersigned agrees to abide by all of its respective terms and conditions as amended from time to time. The undersigned further understands and acknowledges that membership at King Carter Golf Club will only be available if the Club approves the undersigned's Membership Application.

ACKNOWLEDGEMENT OF TERMS

Member Signature		Date
Approved By		_ Date
PLEASE REMIT TO:	King Carter Golf Club	

480 Old Saint John's Road Irvington, VA 22480 Phone: 804-435-7842