

Registration Form(Effective 3/1/2017)

Junior (18-35)∐ Indi	vidual∐ Cou	ple/Parent Child_	J Family∐
Name:	_	DOB:/_	/
Name of Spouse:		DOB:	//
Name of Children:		DOB:	_//
		DOB:	_//
Address:			
City:	State:	Zip:	
Phone: (H)	(C)		
Email:	-		
Donation to KSUGCMRF: J=\$300□	I=\$400 C/	PC=\$500∏ Fam=\$	600
Monthly Fees: \$129 \$179 \$2	209 \$229		
Credit Card Type: AX MC V	'ISA□ DISCO	VER□ EXP:□	
Number:			CVV:
Billing Start Date://	Total Mo	onthly Golf Charges	:: \$
If you would like a GHIN Handicap of Current GHIN #		Cost is \$30 per year	
Option to charge to Colbert Hills: By checking this option you will have to that credit card in the Pro Shop and Club Options are eligible.	the ability to lea	ve a credit card on fi	ile and charge purchases
Signature:			

By signing the Champions Club Registration form, you are liable for the donation the KSUGCRMF along with all Total Monthly Bills for a minimum of one year from the **Billing Start Date** on the registration form.