



College Membership Application

Calendar Year 2025

PERSONAL INFORMATION

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Date of Birth: _____ School: _____

Have you previously been a member? When: _____

Date: _____ Payment Method: Credit Card Cash Check # _____

ANNUAL COLLEGE MEMBERSHIP INFORMATION:

- Membership Rate: \$499 per calendar year. Member **MUST** pay in full at the time of application.
- There is no initiation fee.
- Membership is valid for one calendar year, January to December, regardless of the month joined.
- Member must reapply annually.
- No charging privileges are allowed in the golf shop or the bar.
- Unlimited golf (excluding restricted times or when the course is closed for events or tournaments).
- **COLLEGE MEMBERS:**
 - Must make a tee time and check in with the golf shop.
 - Must be a full-time college student, 23 years of age or under, and show proof of enrollment by showing a school ID card or student portal.
 - Must read, understand, and follow all rules, regulations, policies, bylaws, code of conduct, and follow the dress code.
 - Any breach of the rules, regulations, policies, bylaws, or code of conduct will result in termination.
 - No refunds will be given for a terminated membership.
 - Must play with own set of golf clubs – no sharing of clubs during play.

I, the undersigned, apply to LGCC. I agree to pay the annual dues in accordance with LGCC's Bylaws. I agree to follow all rules, regulations, policies, and code of conduct for LGCC. I understand that any breach of said rules, regulations, policies, and code of conduct may terminate said membership. I understand that the college membership is valid for one calendar year, and I must reapply every year and pay at the time of application. I understand that all purchases must be paid at the time of purchase, and I have no charging privileges in the golf shop or the bar. I agree to receive notifications regarding LGCC events and information via email, phone, text, and mail.

Signature: _____ Date: _____

Employee Name: _____

Annual college membership price effective for the 2025 calendar year * All fees are subject to change per Board/Management approval

For Accounts Office: Entered into system All info entered Code Changed User Account Set Username/PW: _____

Website System Constant Contact Bar Pot New Member Excel list Personal Email Constant Contact Email

Notes: _____

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