



La Grande Country Club

Membership Application

April 2025 – May 2026

History

La Grande Country Club was established in 1924 and opened at its present location in 1928. For over 90 years, this highly regarded nine-hole layout has been a true test for the best of the best and enjoyable for the beginner. The tree-lined fairways, elevated postage stamp greens, and total yardage of 6,500 yards provide an excellent place for any caliber of player to pursue their passion.

Membership Category Description and Pricing

Initiation Fee: One-time payment of \$400

Family Membership: Adult couples or individuals and their children, 18 years or younger, or full-time undergraduate students, 23 years or younger. **\$2,580 year / \$215 month**

Individual Membership: Individuals who certify that no other member of their family will enjoy LGCC privileges except as a paying guest. **\$2,184 year / \$182**

Associate Membership: Family or individual. All adults must be 18 to 30 years of age. Once the oldest person turns 30, the membership will automatically be reclassified as a full family or individual membership. **\$1,944 year / \$162 month**

Out-of-County Membership: A person or persons living outside of Union County for 12 months and not maintaining a residence or residing in Union County for any length of time. **\$972 year / \$81 month**

Social Membership: Usage of all social aspects of the club and tennis courts, excluding golfing facilities. No golf cart storage available.

Social Individual: \$720 year / \$60 • **Social Family:** \$972 year / \$81 month

Acceptance of Membership

We, as listed on this application, are applying for membership to LGCC. We agree to pay the appropriate initiation fee and annual dues in accordance with LGCC Bylaws. Upon approval, we understand that our membership is annual and that we will pay for at least one year's dues, either at once or monthly. Membership dues are subject to an annual increase in April. Annual payments will include any dues increase. We also understand that our membership is valid until written notice is received by LGCC of our termination or our dues or accounts become sixty (60) days in arrears. Upon membership cancellation, a one-year waiting period is applicable before reapplying for membership. We agree to receive notifications regarding LGCC events, notices, and other information via email, phone, text, and mail. We agree to follow all rules and regulations of LGCC Bylaws, Policies, Codes of Conduct, and dress code. We agree to receive monthly statements via the LGCC member portal unless a paper statement is specifically requested. We understand that all prices are subject to change per Board/Management approval.

Contact Information

Stuart Smart: General Manager/Golf Professional * **Brent Austin:** Greens Superintendent

Katy Budlong: Accounts Manager * **Ciara Griffie:** Bar Manager/Event Coordinator

Physical Address: 10605 McAlister Rd, Island City, OR 97850

Mailing Address: 10603 McAlister Rd, Island City, OR 97850

Main Phone: 541-963-4241 * **Bar Phone:** 541-663-8772

Email: lagrandecountryclub@gmail.com

Website: www.lagrandecountryclub.com

Date of Application: _____

Personal Information

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Date of Birth (required for associate membership): _____

Partner Name: _____

Phone: _____

Email: _____

Date of Birth (required for associate membership): _____

Children's names & ages: Under 18, or undergraduate college students living at home 23 or younger:

Membership

Have you previously been a member?: ☐ Yes ☐ No If Yes, When: _____

Membership: Initiation Fee \$400.00

☐ Family (\$215 per month) ☐ Individual (\$182 per month) ☐ Associate (\$162 per month)

☐ Out-of-County (\$81 per month) ☐ Social Family (\$81 per month) ☐ Social Individual (\$60 per month)

Payment Information: ☐ Monthly Payment ☐ Annual Payment

☐ Pay Today ☐ Bill Later ☐ I **want** to sign up for automatic withdrawal (checking or savings only).

Payment Made: ☐ Initiation Fee \$400 ☐ Dues \$ _____ Total Payment \$ _____

Cart Shed: ☐ I want to sign up for a cart shed. *If none is available, you will be put on the waiting list.*

Notes: _____

Member Signature: _____

Employee Name: _____

For Accounts Office: ☐ Account Created ☐ May Charge ☐ Credit Limit ☐ Code Changed **Username/PW:** _____

☐ Information Entered ☐ All Member List Checked ☐ User Account Set ☐ Cybergolf CMS ☐ Constant Contact ☐ Bar Pot

☐ Membership Billed ☐ New Member Excel List ☐ Personal Email Sent ☐ Constant Contact Email Sent

Notes: _____