



Registration Form (Effective 3/1/2022)

Junior (18-35) Individual Couple/Parent Child 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: \$159 \$209 \$239 \$259

Credit Card Type: AX MC VISA DISCOVER EXP: /

Number: CVV:

Billing Start Date: ___/___/___ Total Monthly Golf Charges: \$ _____

If you would like a GHIN Handicap check box Cost is \$40 per year

Current GHIN # _____ (Active Season 3/1-12/31)

Option to charge to Colbert Hills Pro Shop and Colbert's Restaurant

By checking this option you will have the ability to leave a credit card on file and charge purchases to that credit card in the Pro Shop and Colbert's Restaurant at the time of purchase. All Champions Club Options are eligible.

Signature: _____

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