

Lakeview Golf & Country Club

Membership Application

Membership Type:

- Family Membership: \$2,472 per calendar year or \$206 per month
- Additional Family Member: \$200 per year for 1st - \$100 per year for 2nd
Restrictions apply
- Single Membership: \$2,124 per calendar year or \$177 per month
- Business Membership: \$6,490 per calendar year
- Executive Family Membership: \$2,124 per calendar year or \$177 per month
Restrictions apply
- Executive Single Membership: \$1,764 per calendar year or \$147 per month
Restrictions apply
- College Membership: \$413 per calendar year
Restrictions apply
- Junior Membership: \$177 per calendar year
Restrictions apply
- Basic Social Membership: \$142 for the calendar year
- Executive Social Membership: \$295 for the calendar year
- Founding Senior Membership: \$1800 per calendar year or \$150 per month
Restrictions apply
- Founding Weekday Membership: \$1800 per calendar year or \$150 per month
Restrictions apply

Member Information:

Member Name: _____ DOB: _____
Billing Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Please fill out the information below if you have chosen any of the following memberships:

*Family, Business, Executive Family or Additional Family Member
(Additional Family Member for 'Family Memberships' Only).*

Spouse Name: _____ DOB: _____
Child: _____ DOB: _____
Child: _____ DOB: _____
Child: _____ DOB: _____
Child: _____ DOB: _____

Payment Options:

1. Checks payable to Lakeview Golf & Country Club
2. Cash delivered to the pro shop
3. Credit card

Agreement:

By submitting this application, I have read and understand the Lakeview Golf & Country Club membership policy/rules and regulations packet. I understand that if I don't comply with the membership policy/rules and regulations that it may result in immediate dismissal.

Name (printed): _____
Signature: _____ Date: _____