



Membership Application

Membership Type:

- Family Membership -- \$2700 per year (225 Month) Initiation Fee \$2500
- Corporate Membership -- \$2700 per year (225 Month) Initiation Fee \$2500
- Executive Family Membership -- \$1800 per year (150 Month) Initiation Fee \$500
- Executive Single Membership -- \$1500 per year (125 Month) Initiation Fee \$500
- College Membership -- \$350 per year
- Junior Membership -- \$150 per year
- Basic Social Membership -- \$120 for calendar year
- Executive Social Membership -- \$250 for calendar year

Member Information:

Member Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Family/ Corporate/ Executive Family Membership:

Spouse Name: _____

Child: _____ Age: _____ DOB: _____

Child: _____ Age: _____ DOB: _____

Child: _____ Age: _____ DOB: _____

Child: _____ Age: _____ DOB: _____

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: _____

Payment Options:

Checks payable to Lakeview Golf & Country Club

Cash delivered to pro shop

Credit Card*

***Credit Card Information:**

Type: _____ Card #: _____ EXP: _____ CVC: _____

I agree to charge my credit card the amount of \$ _____ for my membership dues and for account balances.

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Name (printed): _____

Signature: _____ Date: _____