OSWEGO COUNTRY CLUB

APPLICATION FOR MEMBERSHIP

Date:_____

... Please Print Clearly / Attach Additional Page(s) If Needed ...

MEMBERSHIP CLASSIFICATION *(check one / see attached instructions)*:

- ☐ Young Adult Primary (18-30)
- ☐ Young Adult Full (18-30)
- ☐ Junior Primary (31-40)
- ☐ Junior Full (31-40)
- ☐ 75 Mile Membership
- ☐ Adult Primary (41-69)
- ☐ Adult Full (41-69)
- ☐ Senior Primary (70+)
- ☐ Senior Full (70+)
- ☐ Social Membership
- ☐ Senior Primary Weekday (70+)
- ☐ Senior Full Weekday (70+)
- ☐ College Student (Full Time)
- ☐ High-School Student

Initiation Fee ($1000.00 + $80.00 Tax): received _____

PERSONAL INFORMATION

MEMBER NUMBER_____

_____
First Name Middle Last Name

_____
Address City State Zip

_____/_____/_____/_____
Home Phone Cell Phone E-Mail Date of Birth

_____/_____/_____/_____
Spouse's / Partner's Name Spouse / Partner Cell Phone Spouse / Partner E-Mail Date of Birth

_____
Please Circle Child / Grandchild Name M / F Date of Birth

_____
Please Circle Child / Grandchild Name M / F Date of Birth

_____
Please Circle Child / Grandchild Name M / F Date of Birth

EMPLOYMENT INFORMATION

_____
Applicant's Employer Position Work Phone

_____
Address City State Zip

_____
Spouse's / Partner's Employer Position Work Phone

_____
Address City State Zip

BANK REFERENCES

_____
Bank or Credit Union Address

_____
Bank or Credit Union Address

PRESENT AND PREVIOUS AFFILIATIONS

Golf or Country Club	Address	Length of Membership
Social, Business or Fraternal Organization	Address	Length of Membership
Social, Business or Fraternal Organization	Address	Length of Membership

OPTIONAL FEES:

GHIN Handicap Registration - ($40.00 + 3.20 Tax Each) How Many Registrations Needed: _____

Applications must be submitted to the Board for consideration, accompanied by written statement of introduction as well as a letter of recommendation from the proposing member.

MEMBER ENDORSEMENTS

Signature of Proposer	Print Name	Date
Signature of Seconder	Print Name	Date
Signature of Seconder	Print Name	Date

APPLICANT'S AFFIRMATION

I agree that if accepted as a member of the Oswego Country Club, I will abide by the Constitution, By-Laws, rules and regulations of Oswego Country Club. I also understand that I am obligated to pay the dues and house minimum fees in accordance with the established Club fees and policies as outlined in the attached schedule.

Signature of Applicant	Date
Signature of Spouse or Domestic Partner	Date

NOTE: ALL APPLICATIONS REGARDLESS OF LEVEL ARE SUBJECT TO REVIEW AND APPROVAL OR DISAPPROVAL BY THE OSWEGO COUNTRY CLUB BOARD OF DIRECTORS. APPLICANTS WILL BE NOTIFIED OF ACCEPTANCE OR DENIAL

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CLUB REQUESTED INFORMATION:

PLEASE LET US KNOW HOW YOU HEARD OUT ABOUT OSWEGO COUNTRY CLUB?

Current Member ☐ Former Member ☐ OCC Website ☐ Web Advertisement ☐

Newspaper Advertisement ☐ Member of a Tournament ☐ Social Function at the Club ☐

Other Please Describe _____