



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 | ☐ Adult Primary | ☐ Senior Primary Weekday |
| ☐ Young Adult Full | ☐ Adult Full | ☐ Senior Full Weekday |
| ☐ Junior Primary | ☐ Senior Primary | ☐ College Student |
| ☐ Junior Full | ☐ Senior Full | ☐ High-School Student |
| ☐ 75 Mile Membership | ☐ Social Membership | |

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

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 - (\$20.00 + 1.60 Tax Each) How Many Registrations Needed: _____****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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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 _____

APPLICATIONS:

Please include your letter of introduction as well as a letter of recommendation from the person or persons proposing you for membership. Original copies of these documents should be delivered to the club via mail or in person. There is a mailbox in the front entryway as well as a mail slot in the office door located upstairs in the clubhouse.