



MEMBERSHIP APPLICATION

We/I hereby apply for: RESIDENT GRADUATING SOCIAL SINGLE CORPORATE

Full Name: _____ SSN# _____

Birthplace: _____ Birthdate: _____

Residence Address: _____ City: _____ Zip: _____

Home Phone: _____ Home E-Mail: _____

Company Name: _____ Position: _____ Yrs Employed: _____

Address: _____ Fax #: _____

Business Phone: _____ Business E-Mail: _____

Spouse: _____ SSN#: _____

Birthplace: _____ Birthdate: _____

Company Name: _____ Position: _____ Yrs Employed: _____

Address: _____ Fax #: _____

Business Phone: _____ Business E-Mail: _____

Years Casper Resident: _____ Former Residence: _____

Present or previous country club associations: _____

Full name and birth dates of all children residing in applicant's household:

Name: _____ Birthdate: _____ Name: _____ Birthdate: _____

Name: _____ Birthdate: _____ Name: _____ Birthdate: _____

Name and relationship, if any, by blood or marriage, to any member or former member: _____

Generally speaking, how do you plan to use the club?: Golf Tennis Swimming Socially

Sponsor's Name: _____ Member #: _____

Sponsor's Signature: _____

Sponsor's Name: _____ Member #: _____

Sponsor's Signature: _____

Initiation Fee Paid with Application \$ _____ Plus one month's dues/other fees \$ _____ Total \$ _____

This application is submitted with the knowledge that the number of members in the Casper Country Club is restricted by its bylaws and that election to membership is dependent upon vacancies and action by the Board of Directors. If elected to membership, We/I agree to be bound by the bylaws, rules and regulations of the Club now in effect or hereafter adopted. A copy of the bylaws has been made available for our/my review.

Signature of Applicant: _____ Date: _____

Signature of Spouse: _____ Date: _____

Two resident members must sign this application for membership. No current member of the Board of Directors may sign the application. The Applicants' name(s) will be posted on the club bulletin board for a period of not less than ten days prior to the Board of Directors considering the application. This is a non-rebate membership.

Date Received: _____ Date Accepted: _____ NEW MEMBER NUMBER: _____