

Membership Application

		Member I	nformatio	n			
Name:							
Address:							
City:			State:			Zip:	
Cell Phone:			Work Phone:				
Email Address:			Date of Birth:				
		Family M	embershi	p			
Spouse:		•					
Child 1:		Child 2:		Chi	Child 3:		
Date of Birth:		Date of Birth:		Dat	Date of Birth:		
Family Memberships and unmarried children attending school on a fu	Includes who are ll-time ba	the legal spouse of under the age of usis. basis.	of the Member 23 and either	who is living in	livi. the	ng in the Member's home e Members's home or	
		Corporate N	<u>Iembersh</u>	ip			
Corporation Name:		1					
Address:							
City:		State:				Zip:	
Member 2:		Member 3:		Mer	Member 4:		
	Ann	ual Membe	ership Cat	egorie	es		
Individual Se ☐ Annual: \$1200 ☐ \$110/Month ☐ Annual: \$950		Sen: Annual: \$950	ior □ \$87/Mon		Corporate (4 designees) ☐ Annual: \$3700 ☐ \$350/Month		
☐ Annual: \$1750 ☐ \$160/Month ☐ Annual: \$1		☐ Annual: \$1350	Family □\$124/Mor		Junior □Annual: \$500		
Monthly Members must pr					e ap _l	plied to the card provided.	
	(Credit Card	Informati	ion			
☐ Visa:	Mastercard:						
Exp. Date:	o. Date: Security Code:			**Charges will be made between the 1st and 5th of each month.			

HOLD HARMLESS

I hereby acknowledge that the use of the Club Facilities and any privilege or service incident to the membership is undertaken with the knowledge of the risk of possible injury. I hereby accept any and all risk of injury to myself, my guest, and family sustained while using the Club Facilities or involved in any event or activity incident to membership I the Club. In accepting the risk of injury, I understand that I am relieving Fundamental Golf Properties (doing business as The Hollows) and any of their managers, directors, officers, employees, and affiliates from any and all loss, cost, claims, injury, damage, or liability sustained or incurred by me, my guests, and my family resulting from or arising out of conduct or event connected with membership in the Club and use of any of the Club Facilities.

VERIFICATION OF APPLICATION

By signing this membership application, I authorize the release of information to The Hollows Golf Club in order to investigate my qualifications for membership and authorize persons or entities to furnish information to the club, include a credit report if requested.

ACKNOWLEDGEMENT OF MEMBERSHIP RIGHTS

Membership at The Hollows Golf Club permits use of the Club Facilities in accordance with this Membership Plan. Membership to The Hollows in not an investment in the Club or its facilities, and does not provide the member with an equity or ownership interest or any vested or prescriptive right or easement in or to the Club or its facilities. Members will not be entitled to vote or participate in the management of the Club. If approved for membership in the Club, the member agrees to be bound by the terms and conditions of the Membership Plan as it may be amended from time to time. The Hollows reserves the right in its sole discretion, to reserve memberships, to any category of membership. Upon completion of payment for membership, each member will receive two complimentary guest passes. *An individual may only use one member guest pass per year.*

MEMBERSHIP COMMITMENT

I acknowledge that by purchasing an annual pass, I will receive membership privileges for 1 year period beginning on the date of purchase. At no time will the purchase of an annual membership be prorated. I further understand that by signing up for a membership billed on a monthly basis, I will have a 1 year commitment from the date of activation. I authorize The Hollows to charge the credit card provided with this application for applicable fees. Charges for dues will be made between the 1st and 5th of day of the month. After the one year commitment is fulfilled, monthly charges will continue until The Hollows has been notified to stop monthly charges.

Member Signature	Date			
Trember Signature				
Accepted by	Date			

Please Remit To:

The Hollows Golf Club 14501 Greenwood Church Road Montpelier, VA. 23192

Phone: 804-883-5381 / Fax: 804-883-7738