



Membership Application

Personal Information

Name: _____ Date of Birth _____

Spouses Name: _____ Date of Birth _____

Other members of my family (under 23 years of age, living at home) should be listed as follows:

1.) _____ Date of Birth _____

2.) _____ Date of Birth _____

3.) _____ Date of Birth _____

General Information (Primary Member)

Home Address _____ City _____ State _____

Zip Code _____ Length of Residence _____ Phone # _____

SSN _____ Email _____

Person to contact in case of an emergency (not living in household)

Name _____ Telephone # _____

Your Employer _____ Your Job Title _____

Business Address _____ Bus. Phone # _____

* Credit Card () MC () Visa () American Express

CC# _____ Exp Date _____

The following dues are billed monthly on the standard statement.

One-Time Joining Fee	\$500	<input type="checkbox"/>
Full Membership	\$215/mo	<input type="checkbox"/>
Out of Area Membership	\$175/mo	<input type="checkbox"/>
Exclusive Ladies Membership ***	\$160/mo	<input type="checkbox"/>
Private Cart Trail Fee	\$ 40/mo	<input type="checkbox"/>
Senior Membership (+60, Weekdays)	\$155/mo	<input type="checkbox"/>
Junior Membership (<32 years old)	\$160/mo	<input type="checkbox"/>

NO ASSESSMENTS, ASSUMPTIONS OF LIABILITY OR OWNERSHIP

My liabilities in membership are limited to payment of the appropriate initiation fees plus membership dues and charges incurred by me, (or my family and guests). Fees, dues and classifications are set by the Owner and may change from time to time. Payments for dues and other charges incurred by me, or my family or guests will be automatically charged to my credit card on file by the 10th day of every month. The use of an invalid card resulting in a late payment will result in a late fee equal to 10% of the total past due amount (per month) for any month my account is not paid on time or in full. If my account balance becomes delinquent, my playing privileges and charging privileges shall be suspended until my account balance is brought back to current. In the event my account becomes over 60 days past due, the Club reserves the right to terminate my membership and pursue collection of the unpaid balance through customary collection channels. I hereby agree to reimburse the club in full for all legal fees and collection agency charges associated with the collection of my account.

Persons granted membership privileges have no ownership rights and shall not have any responsibility for its debts or operation expenses of any kind. The Country Club of Arkansas is a non-equity, semi-private club owned by HJY Golf, LLC. Membership privileges to the Club are subject to the Rules and Regulations established by the Owner.

BY-LAWS

I agree to comply with all the by-laws and Rules and Regulations of the Club. Specific to this cart-included membership, Club owned carts shall be shared whenever possible. Within a particular group, members shall utilize the minimum number of fleet-carts required in order to accommodate the members or paid guest in that group. A cart fee of \$25 shall be charged to the account of any member riding solo in a cart while there is an empty seat in another fleet-cart in the same group. Non golfing guests may occupy an unused cart-seat (free of charge) unless this forces an additional cart to be placed into service in order to accommodate additional paid players.

All members are required to check-in prior to playing and sign a cart waiver prior to the beginning of each round, including replays. In the case of golf cart shortages, the club reserves the right to distribute carts in whatever order deemed appropriate by the staff.

ACCEPTANCE

Signature _____ applied this _____ day _____, 20__

Accepted _____ applied this _____ day _____, 20__