

HEARTLAND CROSSING GOLF LINKS



Member _____ dob __/__/__ Cell (____) ____-____
 Spouse _____ dob __/__/__ Cell (____) ____-____
 Address _____
 City _____ St ____ Zip _____
 Child 1 _____ dob __/__/__ Child 2 _____ dob __/__/__
 Email Address _____

2019 Memberships

- Family Membership (up to 4 Family members at same address) \$2,300 _____
- Individual Membership \$1,750 _____
- Military/ Senior 65+ \$1,550 _____
- Weekday Membership (Monday- Friday only) \$1,450 _____
- Twilight (3pm-close, Monday-Friday only) \$995 _____

Membership Benefits Include:

- Unlimited green and cart fees
- Season range pass
- Handicap services
- Bag Tag, Polo

Options

- Add Spouse \$250 _____
- Unlimited Practice Pass \$300 _____
- Blue Golf Handicap Service \$40 _____

Junior Membership

- Junior Membership (17 & Under) \$300 _____
*Must be accompanied by paid Adult

Monthly Payment Plan

- Monthly Payments April-September \$100 _____
See Below

Discount

- 10% if paid in full by January 31, 2019 _____

_____ **Total** _____
 Member Signature **Membership**
Expires 12/31/19

A monthly payment option is available for the months of April to September. This adds \$100 to your membership and requires a credit card number on file that will be billed on the first of each month starting in April and ending in September. By signing this form it guarantees your membership through December 31st, 2019.

\$350 due at Sign Up

Staff Use Only

Date Pd ____ / ____ / ____ Amount \$ _____ By _____ Form # _____