



Application for Membership

Date: _____ Amount paid: _____ Member #: _____

Type of Membership: Individual: _____ Family: _____ Sports: _____ 10/380: _____

Cart Bundle: _____ Trail Fee: _____

Name: _____ Age: _____

Spouse's Name: _____ Age: _____

Child: _____ Age: _____ Child: _____ Age: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Cell #: _____

Email: _____ spouse e mail: _____

A current Credit Card on File is required for charging privileges:

Type: _____ CC#: _____ Exp: _____

Zip: _____ CVV: _____

Memberships are non transferrable, and non-refundable

By signing this agreement, I agree to follow the Mountain Harbour Golf Club rules and regulations, and proper conduct as outlined in the Member handbook which I am in receipt of.

Name: _____ Date: _____

Name: _____ Date: _____