

# ABILENE COUNTRY CLUB

ESTABLISHED 1921

## Membership Application

**TYPES OF MEMBERSHIP** (Please Check Category You Are Applying For)

### SOCIAL MEMBERSHIPS

- Social** \$500 Initiation Fee  
Dues: \$300.61 Per Month
- Intermediate Social** \$500 Initiation Fee  
Dues: \$229.28 Per Month (32-39 Years of Age)
- Junior Social** \$500 Initiation Fee  
Dues: \$178.33 Per Month (21-31 Years of Age)

### TENNIS MEMBERSHIPS

- Tennis** \$600 Initiation Fee  
Dues: \$331.18 Per Month
- Intermediate Tennis** \$600 Initiation Fee  
Dues: \$305.70 Per Month (32-39 Years of Age)
- Junior Tennis** \$600 Initiation Fee  
Dues: \$280.23 Per Month (21-31 Years of Age)

### GOLF MEMBERSHIPS

- Golf** \$1,200 Initiation Fee  
Dues: \$402.51 Per Month
- Intermediate Golf** \$1,200 Initiation Fee  
Dues: \$382.13 Per Month (32-39 Years of Age)
- Junior Golf** \$1,200 Initiation Fee  
Dues: \$361.75 Per Month (21-31 Years of Age)

**WHO RECOMMENDED YOU TO THE CLUB?** (Please list two current ACC members. **A letter of recommendation is required from each.**)

NAME: (1) \_\_\_\_\_ NAME: (2) \_\_\_\_\_

### APPLICANT

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(MM/DD/YY)

MARITAL STATUS: \_\_\_\_\_ ANNIVERSARY DATE: \_\_\_\_\_  
(MM/DD/YY)

SPOUSE'S NAME: \_\_\_\_\_ SPOUSE'S BIRTHDAY: \_\_\_\_\_  
(MM/DD/YY)

RESIDENCE ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

MOBILE #: \_\_\_\_\_ SPOUSE'S MOBILE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_ SPOUSE'S EMAIL: \_\_\_\_\_

YEARS WITH EMPLOYER: \_\_\_\_\_ YEARS OF RESIDENCE IN ABILENE: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

ABILENE BANK: \_\_\_\_\_ PREVIOUS CLUB MEMBERSHIP: \_\_\_\_\_

APPLICANT'S CURRENT EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

APPLICANT'S BUSINESS ADDRESS: \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS TELEPHONE: \_\_\_\_\_ BUSINESS FAX: \_\_\_\_\_ BUSINESS EMAIL: \_\_\_\_\_

**PLEASE COMPLETE THE BACK PAGE**

SPOUSE'S CURRENT EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

SPOUSE'S BUSINESS ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BUSINESS TELEPHONE: \_\_\_\_\_ BUSINESS FAX: \_\_\_\_\_ BUSINESS EMAIL: \_\_\_\_\_

MAIL STATEMENT TO: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAIL NEWSLETTER TO: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

### **ELIGIBLE CHILDREN**

Eligible Children are those who are under twenty-six (26) years of age, and are unmarried.

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SEX:  M  F

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SEX:  M  F

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SEX:  M  F

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SEX:  M  F

**PLEASE INCLUDE A RECENT PICTURE OF YOUR FAMILY FOR OUR FILES**

### **NAMES AND ADDRESSES OF TWO BUSINESS REFERENCES:**

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*It is agreed that all persons using the facilities of Abilene Country Club are bound by and shall comply with all by-laws, rules, and regulations of the Club*

*I hereby authorize the Abilene Country Club to obtain my credit report from a credit reporting agency. I understand that as part of the Membership Application process, the Abilene Country Club will review my credit report in conjunction with its consideration of establishing an account associated with the membership.*

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**SIGNATURE OF SPOUSE**

**\*\*PLEASE DO NOT WRITE IN THE SPACE BELOW\*\***

DATE RECEIVED BY SECRETARY: \_\_\_\_\_

DATE APPROVED TO USE CLUB: \_\_\_\_\_

DATE APPROVED BY BOARD OF DIRECTORS: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

INITIATION FEE: \_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_