

Membership Expiration Date 12/31/2012

Membership # _____

MEMBERSHIP APPLICATION

Information to be furnished by applicant. All questions must be completed. Please type or print.

CONTACT INFORMATION

Name _____

Principal Residence _____

Date of Birth: _____ Home Telephone (____) _____ Cell Phone (____) _____

Name of Spouse: _____ Spouse's Date of Birth: _____

Home E-Mail Address: _____

Previous Club: _____



North East
1500 Chesapeake Club Drive
North East, MD 21901

410-287-0200

Rising Sun

128 Karen Drive
Rising Sun, MD 21911

410-658-4343

www.chesapeakegolf.com

Name of Employer _____ Title or Position _____

Business Address _____

Business Telephone (____) _____ Fax (____) _____

Business E-Mail Address: _____

CHILDREN AGE 21 AND UNDER

_____ DOB _____ _____ DOB _____

_____ DOB _____ _____ DOB _____

TYPE OF MEMBERSHIP

Individual Family Midday - Individual Midday - Family

Twilight - Individual Twilight - Family Regional Junior

Weekday - Individual Weekday - Family Boomer - Age 50+ Work & Play

Bag / Locker Combo 2012 Unlimited Range Add Child # _____ Add Range to Membership

WHAT TOTAL MEMBERSHIP PAYMENT INCLUDES Total Amount = \$ _____

Membership + Add Child + Add Bag & Locker + Add Range = Total Membership

1. Payment \$ _____ Date Pd: _____ How Paid: _____ Balance: \$ _____

2. Payment \$ _____ Date Pd: _____ How Paid: _____ Balance: \$ _____

3. Payment \$ _____ Date Pd: _____ How Paid: _____ Balance: \$ _____

I hereby make application for membership to the Chesapeake Bay Golf Club and agree to be subject to all rules and regulations governing the club. If I violate any rules and regulations governing the Club, I agree that my membership may be subject to suspension or termination. I also understand that my Membership payment is non-refundable.

X _____
Signature of Applicant

Date Submitted

FOR CLUB USE ONLY

Date Received _____

X _____
Management

Office Use Amount Still Owed

\$ _____
Membership

\$ _____
Add Child

\$ _____
Bag / Locker

\$ _____
Range

\$ _____
Handicap

\$ _____

\$ _____

\$ _____
TOTAL TO PAY

Bag Tag Given

Handouts

Member Book

Membership Card Ordered

Locker Form Filled

On Handicap Computer

Entered on NE Pro Shop Computer

Entered on RS Pro Shop Computer

2 Year Plan

3 Year Plan

Hero 5%

New Foursome

Refer a Friend