

CENTER COUNTRY CLUB

P.O. BOX 2106 CENTER, TX 75935

MAIN NUMBER (936) 598-7415

BOOKKEEPING (936) 598-7420

PRELIMINARY MEMBERSHIP APPLICATION

Primary Applicant and/or Corporate Name: _____

Date of Birth _____ Age _____ Sex: _____ Social Security #/ Tax ID.: _____

Street Address: _____ How Long: _____

Mailing Address: _____
(if different from street address)

City: _____ County _____ State: _____ Zip code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail address: _____

Spouse's Name: _____ Social Security #: _____ DOB: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Business / Employment: _____ How Long: _____

Address: _____ City/State/Zip: _____

Membership Category: ___ Stockholder ___ Junior ___ Social ___ Corporate

Range Ball Program: ___ YES ___ NO

Amount Paid: _____ Financial Institution Used: _____

Applicant's Signature: _____ Date: _____

Sponsoring Voting Member's Signature: _____ Date: _____

Sponsoring Voting Member's Signature: _____ Date: _____

Date Full Board **Approved / Declined:** _____
(circle one)

All applicable fees (i.e. membership, first month dues, and applicable sales taxes) are due and payable at time the application is made. By applying for membership to the Center Country Club, you and/or family members agree to all the terms and conditions as set forth in the Center Country Club By-Laws. A copy of the by-laws may be obtained upon request. You hereby authorize Center Country Club or its agent to obtain a credit report if they deem necessary.