

## **APPLICATION FOR MEMBERSHIP**

l,	hereby request a/n	Membership
at the Wheeling Country Club (The Club).	, ,	·
Upon acceptance of my request, I agree:		
1. To pay annual fees and any other charges in ammethod of payment is via an automatic draft payment		
2. To abide by the rules, regulations, policies and procedures as may be prescribed by The Club and communicated via email, newsletters, or The Club changes.	are subject to change from time to time	e. These changes may be
3. I understand I have the privilege of charging exp the close of each month.	penses to my membership account and	agree to pay those charges afte
4. The Club will have the right to establish rules, re Such rules, regulations, policies and procedures mand the interests of The Club. Privileges attributed time for reasons considered sufficient by The Club and enjoy the Facilities based on the rules, regulatime to time, and on the basis that the guests pay for all charges incurred by their guests. Guests muby The Club. The Club shall have the right to deter and procedures of The Club and it is determined that the guest leave the Facilities.	lay be modified or varied from time to till to guests may be modified, varied, denotinits sole and absolute discretion. Guestions, policies and procedures that are of the required fees applicable to them. Thust adhere to the rules, regulations, polimine whether the guest is complying with	me so as to best serve member lied, limited or withdrawn at any ests will be entitled to employ letermined by The Club from he member shall be responsible cies and procedures established ith all rules, regulations, policies
5. That my membership obligation is through June notification to the General Manager by June 1st an understand all club privileges cease on this date. Item without The Club approval for qualifying ever	nd will owe no further financial obligation Membership resignation requests will n	on to The Club after June 30th. I
6. If I do not notify The Club of my resignation, the obligated for the annual membership fees for the is from July 1st of one year through June 30th of teach year I am in active membership status on Ju	next membership billing year. I underst the following year and that I am obligate	and the membership billing year ed for annual membership fees
7. If my request is approved and if married, we agr payment of any obligation, I/we may owe to The C attorney fees.		_
Applicant Printed Name:	Applicant Signature:	Date:
Spouse Printed Name:	Spouse Signature:	Date:



## **MEMBERSHIPS**

FAMILY GOLF MEMBERSHIP - \$350 per month Includes: Unlimited Access to Golf, Dining, Pool, Tennis & Social Events for the Entire Family. Family includes spouse, children and grandchildren up to age 23. The monthly food and beverage minimum for the Family Golf Membership is \$75.*
INDIVIDUAL GOLF MEMBERSHIP - \$225 per month Includes: Unlimited Golf for the Primary Member. Unlimited Access to Dining, Pool, Tennis & Social Events for the Entire Family. Family includes spouse, children and grandchildren up to age 23. The monthly food and beverage minimum for the Individual Golf Membership is \$50.*
SOCIAL CLUB MEMBERSHIP - \$125 per month Includes: Access to Golf, Dining, Pool, Tennis & Social Events for the entire family. This membership allows limited access (6 rounds per year) to the golf course with rounds charged at standard guest fees. Family includes spouse, children and grandchildren up to age 23. The monthly food and beverage minimum for the Social Club Membership is \$100.*
CORPORATE GOLF INDIVIDUAL MEMBERSHIP - \$433.33 per month Includes: Unlimited Access to Golf, Dining, Pool, Tennis & Social Events for one Golf Member with 3 guests per day and Full Family Club Privileges. Additional Memberships may be purchased at 15% off. {Offer only for Corporate Employees/Staff} The monthly food and beverage minimum for the Corporate Golf Individual Membership is \$150.* Other Corporate Designees can receive a Family Golf Membership for a 20% discount.
* Minimum spend does not include an automatic 20% gratuity or applicable taxes.

PRIMARY C	PRIMARY CLUB MEMBER INFORMATION					
P	PLEASE FILL OUT COMPLETELY					
_ast Name:	First Name:					
Address:	City:	State:	ZIP			
Home Phone:	Cell Phone:					
Name of Employer:	Job Title/Occupation:					
Business Address:	City:	State:	ZIP			
Business Phone						
Email (1):	Email (2):					
All club correspondence is done via email (Newsletters, Weekly	Updates, Tee Time, & Monthly Invoices)					
For mailing statements, please use my: 🔲 Home	Address Business Address					
Single Married Anniversary Date	<del></del>					



FAMILY MEMBERS ON MEMBERSHIP				
Last Name	First Name	Relationship	Birth Date	<b>Issued</b> OFFICE USE ONLY