

RUTLAND COUNTRY CLUB P.O. BOX 195

RUTLAND, VT 05702-0195 802-773-7061

MEMBERSHIP APPLICATION

Please check type of members	hip applying for:	Year Applying for:	
MEMDEDCHID TVDE.		D.O.B://	_
MEMBERSHIP TYPE: Premium - Single -	Counles - Fam	ily Super Senior -	
			College Intermediate
Junior - Social -		j Toding Professional 30	conege intermediate
Julioi Sociai	Corporate -		
APPLICANTS NAME:			
Residential Address:			
City:			
E-mail			
Home Phone: (ork Phone: (
	Position:		
Work Address:			
FAMILY INFORMATION: Spouse's Name (If Am	y)	DOB	
Children (If Any)		D.O.B_	
emicrem (m 1 mg)			
Any family members of	currently members of RCC	C? If yes, please list name ar	
		, , , , , , , , , , , , , , , , , , ,	
GOLF BACKGROUND:			
Have you belonged to a Golf (Club before: Yes No	Number of Yea	rs:
Club Name:			ap Index:
Address:			Ю
City, State, Zip		. <u></u>	
SPONSOR - Please note: spons			
application and other requiremen	•	•	•
person is of the highest integrity	and will support the Rutland	d Country Club in participatio	n of both the sport and the
activities of the club.			
	1	1	
SPONSOR - PLEASE PRIN	/ T NAME	SIGNATURE	DATED
APPLICANT -	INAME	SIGNATURE	DATED
In applying for membership to the	ne Rutland Country Club. Lu	understand the criteria for men	obership, and that in accepting
			participating in its activities, meet
financial obligations in a timely			
membership.			r
F .			
	/		
PLEASE PRINT NAME	SIGNATU	J RE	DATED