



RUTLAND COUNTRY CLUB
P.O. BOX 195 RUTLAND, VT 05702-0195
802-773-7061
MEMBERSHIP APPLICATION



Please check type of membership applying for:

Year applying for: _____
 D.O.B: ____/____/____

MEMBERSHIP TYPE:

Premium- Senior- Family- Super Senior- Young Professional-
 Young Professional 36- College Intermediate- Junior- Social-
 Corporate: Silver- Gold- Platinum-

APPLICANTS NAME: _____

Residential Address: _____
 City: _____ State: _____ Zip: _____
 E-mail _____@_____
 Home Phone: (____) - ____ - _____ Work Phone: (____) - ____ - _____
 Place of Employment: _____ Position: _____
 Work Address: _____

FAMILY INFORMATION:

Spouse's Name (If Any) _____ D.O.B _____
 Children (If Any) _____ D.O.B _____
 _____ D.O.B _____
 _____ D.O.B _____

Any family members currently members of RCC? If yes, please list name and relationship:

GOLF BACKGROUND:

Have you belonged to a Golf Club before: Yes / No Number of Years: _____
 Club Name: _____ Present Handicap Index: _____
 Address: _____ USGA GHIN NO. _____
 City, State, Zip. _____

SPONSOR - Please note: sponsor must be a Senior member, whose responsibility is to insure completeness of the application and other requirements of the membership committee. As a sponsor of the above-named person, I believe this person is of the highest integrity and will support the Rutland Country Club in participation of both the sport and the activities of the club.

_____/_____/_____
 SPONSOR - PLEASE PRINT NAME SIGNATURE DATED

APPLICANT - In applying for membership to the Rutland Country Club, I understand the criteria for membership, and that in accepting membership, I agree to abide by the rules and regulations of the Club, support the Club by participating in its activities, meet financial obligations in a timely fashion and demonstrate the highest degree of sportsmanship throughout my membership.

_____/_____/_____
 PLEASE PRINT NAME SIGNATURE DATED