



## Application for Junior Membership

**Junior Name** \_\_\_\_\_ **DOB** \_\_\_/\_\_\_/\_\_\_

**Home Address** \_\_\_\_\_

**City, St. & Zip** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

Guardian Title (please circle one):  
Mr. Mrs. Ms. Dr. Hon. Rev. Other: \_\_\_\_\_

**Guardian Name** \_\_\_\_\_ **Relationship to Junior** \_\_\_\_\_

**Address** (if different) \_\_\_\_\_

**Cell Number** \_\_\_\_\_ **Email** \_\_\_\_\_

**Employer** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

Guardian Title (please circle one):  
Mr. Mrs. Ms. Dr. Hon. Rev. Other: \_\_\_\_\_

**Guardian Name** \_\_\_\_\_ **Relationship to Junior** \_\_\_\_\_

**Address** (if different) \_\_\_\_\_

**Cell Number** \_\_\_\_\_ **Email** \_\_\_\_\_

**Employer** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Membership Type:**

<u>Junior</u>	_____ <b>Initiation Fee</b>	<b>\$500*</b>
	_____ Junior	<b>\$120*</b>

\* All fees will be charged applicable tax and are listed at the "before tax" rate. Fees may be changed in accordance to club rules.



Select one of the following options:

\_\_\_ Please use the card below for my monthly dues & charges.

\_\_\_ Please use the card below for my charging privileges only.

### Credit Card Information

**Billing Address** \_\_\_\_\_

(if different than mailing address)

**Card #** \_\_\_\_\_

**Expiration** \_\_\_\_\_

**CVV Code** \_\_\_\_\_

**I \_\_\_\_\_, authorize River Oaks Golf Club to charge the current amount of the monthly dues/charges from the above credit card on or before the 5<sup>th</sup> day of each month as long as I am a member at River Oaks Golf Club. There will be a \$25 service charge on all returned or declined monthly collections.**

**I understand that if I drop my membership for the winter months, I am subject to pay an initiation fee and/or "skipped" months dues to rejoin.**

**Cancellation of membership must be submitted in writing 30 days prior to my cancellation date.**

**Signature** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

### Agreement

Applicant acknowledges and agrees that by execution of this membership application, and acceptance of the application by River Oaks Golf Club, applicant shall be bound by all terms and conditions of the Bylaws and Rules and Regulations of the Club as currently in effect and as may be amended from time to time.

**Name of Referral:** \_\_\_\_\_



## Bank Information

**Financial Institution** \_\_\_\_\_

**Routing #** \_\_\_\_\_

**Acct. #** \_\_\_\_\_

**Billing Address** \_\_\_\_\_

(If different than mailing address)

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**I \_\_\_\_\_, authorize River Oaks Golf Club to deduct the current amount of the monthly dues from the above checking / savings (circle one) account on or before the 5<sup>th</sup> day of each month as long as I am a member at River Oaks Golf Club. There will be a \$25 service charge on all returned or declined monthly collections.**

**I understand that if I drop my membership for the winter months, I am subject to pay an initiation fee and/or "skipped" months dues to rejoin.**

**Cancellation of membership must be submitted in writing 30 days prior to my cancellation date.**

**Signature** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

## Agreement

Applicant acknowledges and agrees that by execution of this membership application, and acceptance of the application by River Oaks Golf Club, applicant shall be bound by all terms and conditions of the Bylaws and Rules and Regulations of the Club as currently in effect and as may be amended from time to time.

**Name of Referral:** \_\_\_\_\_