

# Halifax Country Club Membership Application

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Children's Names: \_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

Employer: \_\_\_\_\_ No. of Years: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ No. of Years: \_\_\_\_\_

Name(s) to appear on stock: \_\_\_\_\_

I hereby certify that the foregoing information and statements are true.

Executed and signed in the City or County of \_\_\_\_\_ on this \_\_\_\_\_

Day of \_\_\_\_\_ month \_\_\_\_\_ year.

Applicant's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

\* If you are a golfer, your USGA handicap fee is covered in your membership dues. Please see our club manager, Lee Tysinger to have your golf information entered into the USGA handicap system.

# Halifax Country Club

## Membership Application

Vouched for by the following two stockholders:

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All new applicants to Halifax Country Golf Club, Inc., excluding qualifying Junior Memberships and Non-resident Memberships, will be required to purchase a share of stock at the cost of \$500.00 per share (unless otherwise stipulated).

Only Stockholder Memberships can vote on club matters and serve as a member of the Board of Directors.

Please indicate how you would like to pay for your stock. Please check one.

\_\_\_\_\_ One-time payment of \$500.00

\_\_\_\_\_ Bill over 5 payment Cycles (10 Months)

Please indicate the type of membership choice. Member must be 18 years or older. Please check one.

\_\_\_\_\_ Regular Membership

\$150.00 per month.

\_\_\_\_\_ Junior Membership

Must be 32 years of age or younger to qualify.

Must purchase a share of stock when age becomes 33 years, or forfeit membership to the Club.

Dues will increase to Regular Membership when age becomes 33 years.

\$100.00 per month with a minimum one-year commitment.

Note: If joint membership, age determined by oldest of the two.

\_\_\_\_\_ Non-Resident Membership

The primary residence is located outside of Halifax County, VA.

\$100.00 per month.

Please attach a check for the first month's billing of your membership (\$150 or \$100)