

APPLICATION FOR MEMBERSHIP SHARON COUNTRY CLUB

149 East Street, Sharon, MA 02067

Date: _____

I hereby make an application for Membership in Sharon Country Club and agree, if elected, to comply with the By-Laws of the Club.

Name: _____

—

Street
Address: _____

City or Town: _____ State: _____ Zip
Code: _____

Phone
Number: _____

Date of Birth: _____ (Mandatory for all members under 35 years old)

Email
Address: _____

If you have an established handicap, please provide GHIN # _____

Class of Membership Desired: (Check Desired Membership you are seeking)

- Regular Active** *Full playing, voting & office holding privileges*
- Intermediate** *(21-35 years old) Full playing, **NO** voting or office holding privileges*
- Class A** *Weekdays all day & Sat, Sun, holidays after 1:00pm*
- Family** *1 RA, 1 Class A & unlimited Child of a Member or Junior under age 21
See rights/restrictions of each class category*

Regular Active Members Name: _____

- Child of Member** *Must be child of RA or Class A, under 13 years of age
Weekdays all day & Sat, Sun, holidays after 3:00 pm
Must be accompanied by a member of any class who is at least 16 years of age
when on the golf course, driving range or chipping area*

RA or Class A Members Name: _____

- Associate** *Weekdays only, **NO** golfing Sat, Sun, holidays*
- Junior** *(13-20 years old) Weekdays all day & Sat, Sun, holidays after 3:00pm*
- Limited Playing Social** *Limited to two rounds of golf per calendar month
Weekdays all day & Sat, Sun, holidays after 1:00pm
Guest privileges, unlimited driving range and clubhouse privileges*

MGA membership is mandatory for all Members

Dues are payable in full or in 2 installments due Feb 1st & May 1st, with a deposit due Nov 1st

Golf club storage and lockers are available

*Proposed by:

1. _____

2.

*Article-X, Sect 3: The names of all persons seeking membership in Sharon Country Club shall be proposed and seconded in writing by two Regular Active members of the Club.