



2019 Brookings Country Club

Membership Application

I hereby apply to the Brookings Country Club in the classification checked below:

- Single Trial Membership
- Family Trial Membership
- Single Membership
- Family Membership
- Single Over 72 Membership*
- Family Over 72 Membership*
- Junior (High School) Membership*
- Social Membership/ Includes 2 rounds of golf in 2019

Optional Services Desired:

- USGA Handicap (____ # of handicaps desired)
- Club Storage & Cleaning (____ # desired)
- Locker (____# desired)
- Cart Storage (NC) ; Gas____ Electric____

Payment Options:

- Lump Sum Payment
- Automatic Bank Withdrawal: 10 Payments on Dues
Feb - Nov, See back for explanation
- Two Payment Plan: 50% by April 1st; 50% by June 1st

*Requires Birth Dates on Application

Applicant Information

Name: _____ Email: _____

Date of Birth: ____ / ____ / ____ *Required

Mailing Address: _____ Cell Phone: _____

City, State, Zip: _____

Occupation: _____ Spouse's Phone: _____

Spouse's Name: _____ Golfer: _____ Non-Golfer: _____

Spouse's Email: _____ Spouse's Birthdate: ____ / ____ / ____

Dependent Children (and Birthdates) Who Reside at Home and Will Play Golf:

Name: ____ / ____ / ____ Name: ____ / ____ / ____

Name: ____ / ____ / ____ Name: ____ / ____ / ____

Membership Dues & Fees Pricing

(Please Note that All Golf Memberships Except Junior Memberships Include Cart Lease, Cart Storage, or Course Usage, and Driving Range Privileges)

****Initiation Fee Required:** Family - \$2095 Single - \$1775 Family Over 72 - \$1795 Single Over 72 - \$1495

***Initiation Fee is \$1500 payable at \$150/yr*

No Initiation Fee Required: Single 3 Year Trial Membership - \$1199*** Family 3 Year Trial Membership - \$1499***

***** Price will go up \$100 each of the next 2 years** Junior - \$275 Social - \$100

Optional Services: USGA Handicap - \$25 15 & Under USGA Handicap - \$5 Club Storage - \$140 Locker - \$40

All Fees Are Subject to SD Sales Tax



EZ_PAY AUTOMATIC BANK TRANSFER AUTHORIZATION

TRANSFER FROM:

_____ Primary Checking _____ Primary Savings _____ Checking _____ Savings

Customer Name (Please Print) _____

Customer Address (Please Print) _____

Customer Email (Please Print) _____

Customer Phone Number _____

Name of Financial Institution _____

Routing Number: _____ Account Number: _____

****Credit Card on File:** () MC/Visa () Disc () Amex; Exp. Date (MMYY) _____

****Credit Card #:** _____ **Member #:** _____

TRANSFER TO:

**Brookings Country Club
2180 Clubhouse Dr
Brookings, SD 57006**

Transfer will be on the 15th day of each month, starting the 15th of the month you sign up (if applicable) and will consist of your entire balance from the last day of the preceding month.

I (we) authorize the BCC to transfer funds as indicated *above*. I (we) agree to maintain sufficient balances to *cover* such transfers. I (we) agree that the rights of the Bank with respect to each transfer shall be the same as if it were a withdrawal personally signed by me (us). This agreement shall remain in effect until revoked by me (us) or cancelled by the BCC.

Customer
Signature

Date

***** Please attach a voided check if possible**

Fill out and return to Brookings Country Club, 2180 Clubhouse Dr., Brookings, SD 57006
****Brookings CC requires a credit card on file for any member not signed up for EZ-Pay**