

# Deep Springs Country Club, Inc.

P.O. Box 747

Madison, NC 27025



**MEMBERSHIP APPLICATION**

## TO THE BOARD OF DIRECTORS:

I hereby apply for membership in the Deep Springs Country Club, Inc. I agree that if elected to membership I will comply with all by-laws, rules and regulations of the Club. I also agree that I will assume all responsibility, including all indebtedness, for myself, members of my family who are entitled to use the Club, and our guests.

I hereby certify that I give Deep Springs Country Club, Inc. or their representative, the right to verify any information given on this application, or any other information that may be necessary including contacting my references, past or present employer.

Type of Membership Requested \_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_

If referred by a DSCC member, identify member's name: \_\_\_\_\_

TO BE SIGNED BY 1 MEMBER OF DEEP SPRINGS COUNTRY CLUB, INC.

\_\_\_\_\_ Date: \_\_\_\_\_

This Application must be accompanied by deposit of:

\$ _____ Full Participating Membership	\$ _____ Social Membership
\$ _____ Youth Membership	\$ _____ Individual Membership
\$ _____ Young Executive I	\$ _____ Young Executive II
\$ _____ Pool Only Membership	\$ _____ Other

Said deposit will be refunded if approval of Membership is denied. If any changes occur in your marital status, or children are added to your family please inform the administrative office.

**TO THE COMPLETED BY APPLICANT:**

(Please type or print in ink)

1. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

2. Home Address \_\_\_\_\_ Years Resided \_\_\_\_\_

3. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Employer \_\_\_\_\_ Years Employed \_\_\_\_\_

5. Employer Address \_\_\_\_\_ Position \_\_\_\_\_

6. Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

7. Email Address \_\_\_\_\_

8. Former Home Address (if your residence has changed to this area within the last 24 months)

\_\_\_\_\_

9. Former Employer \_\_\_\_\_ Years employed \_\_\_\_\_

10. Former Employer Address \_\_\_\_\_

11. Married \_\_\_\_ Single \_\_\_\_ Spouse's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

12. Names and birth dates (last name if different from yours) of all children unmarried, under 22 or full time student, living at your above residence.

\_\_\_\_\_

13. Past or present club connection (if any) \_\_\_\_\_

\_\_\_\_\_

14. Bank Reference \_\_\_\_\_

15. Personal Reference (3) and addresses. If your residence has changed from another area to this area within the last 24 months, at least 1 reference should be from your previous residence.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. All club bills to be e-mailed unless otherwise noted: \_\_\_\_\_

## TO BE FILLED IN BY THE CLUB

Date Membership Application Received by Club \_\_\_\_\_

Action of Membership Committee:

Recommended \_\_\_\_\_ Not Recommended \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_

Chairman of Membership Committee

Date Posted \_\_\_\_\_ Removed From Posting \_\_\_\_\_

Action of Board of Directors:

Approved \_\_\_\_\_ Rejected \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_

President of the Club

Date Processed: \_\_\_\_\_

Deposit Amount Enclosed: \_\_\_\_\_

Total Membership Dues: \_\_\_\_\_ Rec'd Date \_\_\_\_\_

1st Installment \_\_\_\_\_ Rec'd Date \_\_\_\_\_

2nd Installment \_\_\_\_\_ Rec'd Date \_\_\_\_\_

Designated Club Member #: \_\_\_\_\_

Deep Springs Homeowner: Yes / No

Paid in Full Amount: \$ \_\_\_\_\_

Transferable Membership: Yes / No      Transferable \$ Amount: \$ \_\_\_\_\_