



WAUKEWAN GOLF CLUB

2010 Application

Send payment to:
Waukewan Golf Club
PO Box 403
Meredith, NH 03253

APPLICATION FOR MEMBERSHIP (Submit with payment)

Date of Application: _____

Name(s): _____

Address (winter): _____

Address (summer): _____

E-Mail Address: _____

Telephone (winter): _____

(Summer): _____

I am paying by check.

My Check is enclosed. _____

Credit Card Purchase: Visa / Master Card / American Express
(Please circle the card you are using)

Name on Credit Card: _____

Total Amt. of Purchase: \$ _____

Credit Card Number: _____ Authorization Code _____
(Back of card)

Expiration: _____ Zip Code: _____

Please Check All That Apply To Payment

- Full Membership _____
- Full 2nd Dependent _____
- Weekday Membership _____
- Weekday 2nd Dependent _____
- Junior/Student/Clergy _____
- Family Membership _____
- Season Golf Cart _____
- Season Golf Cart (2nd dependent) _____
- Club Storage _____

Bonus Choice (valid until March 31st)

5 Golf Cart passes _____ 2nd dependent _____

Or

Driving Range _____ 2nd dependent _____

Total Amount \$ _____