



Greystone Golf & Country Club
Membership Application
 (Revised 3/1/09)

Name: _____ **Spouse:** _____

Home Address: _____ **City** _____

State _____ **Zip** _____ **Home Phone** _____

Employer: _____ **Phone:** _____ **Fax:** _____

Date of Birth: _____ **Social Security #:** _____ **Cell #:** _____

Email: (H) _____ **(W)** _____

Spouse's Employer: _____ **Phone:** _____ **Fax:** _____

Date of Birth: _____ **Social Security #:** _____

Email: (H) _____ **(W)** _____ **Cell #:** _____

Eligible Family Members: (Unmarried children under the age of 18, or 24 if in school and claimed on your tax return.)

Full Name: _____ **Birthdate:** _____

Full Name: _____ **Birthdate:** _____

Full Name: _____ **Birthdate:** _____

Full Name: _____ **Birthdate:** _____

****I accept responsibility for all charges incurred by any family member listed above**

Membership Classification Desired:

FULL _____ (36& older), *ASSOCIATE* _____ (under 35), *TENNIS/SWIM/SOCIAL* _____

CORPORATE _____ Company Name: _____

STATE _____

Credit Card Info: (If you want charging privileges)

Am. Express: _____ **Exp Date:** _____

Mastercard: _____ **Exp Date:** _____

Visa: _____ **Exp Date:** _____

References: Provide names of two (2) references (Greystone members, bankers, attorneys, etc.)

Full Name _____ Relationship _____

Full Name _____ Relationship _____

Signature _____