

# Legend Oaks Golf & Tennis Club Membership Application

**First/Last Name** \_\_\_\_\_

**Spouse Name** \_\_\_\_\_

Home Address \_\_\_\_\_

Own \_\_\_\_\_ Rent \_\_\_\_\_ Military \_\_\_\_\_ Active \_\_\_\_\_ Retired \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SS# or Drivers License \_\_\_\_\_ Spouse \_\_\_\_\_

Primary Phone CELL \_\_\_\_\_ WK \_\_\_\_\_ HOME \_\_\_\_\_

Spouse Phone CELL \_\_\_\_\_ WK \_\_\_\_\_ HOME \_\_\_\_\_

Email Address-Primary \_\_\_\_\_

E-Mail Address-Additional \_\_\_\_\_

Member Date of Birth \_\_\_\_\_ Spouse Date of Birth \_\_\_\_\_

TO BE ELIGIBLE FOR MEMBERSHIP, CHILDREN MUST BE UNDER THE AGE OF 23 YEARS AND LIVING WITH MEMBER FULL TIME, PROOF WILL BE REQUIRED.

Children (or Corporate) Names:

1 \_\_\_\_\_ DOB \_\_\_\_\_ 2 \_\_\_\_\_ DOB \_\_\_\_\_

3 \_\_\_\_\_ DOB \_\_\_\_\_ 4 \_\_\_\_\_ DOB \_\_\_\_\_

## **Membership Dues Billing Information**

**Charging Privileges Option** Yes / No (Circle One) **Initial** \_\_\_\_\_

If answer is 'Yes', everyone listed under membership will be given privileges unless otherwise noted.

**Billing Method/Timing:** Invoice \_\_\_\_\_ Credit Card \_\_\_\_\_ / Monthly \_\_\_\_\_ Annual \_\_\_\_\_

**Credit Card Monthly Auto Pay Option** Yes / No (Circle One) **Initial** \_\_\_\_\_

*\*Monthly billing is only available to Golf Members.*

**Note: All members are required to have a valid credit card on file** for security purposes. In the event the dues become over thirty (30) days past due, I authorize Legend Oaks Golf Operations, LLC to place the remainder of the monthly balance owed on the credit card.

**Initial** \_\_\_\_\_

## **Non-Refundable Initiation Fee**

Initiation Fee: \$ \_\_\_\_\_ Single Payment Promotion: \_\_\_\_\_

Military Branch \_\_\_\_\_ Active \_\_\_\_\_ Retired \_\_\_\_\_ 25% Disc \_\_\_\_\_

**\*For Office Use Only\***  
**Membership Options**

**Golf Membership Options:** (Junior age 12-18 / Young Executive age 21-34 / Senior age 60+)

Level: Single \_\_\_\_\_ Couple \_\_\_\_\_ Family \_\_\_\_\_ Golf Only \_\_\_\_\_ Legend(Pool/Tennis) \_\_\_\_\_

Type: Young Executive \_\_\_\_\_ Executive \_\_\_\_\_ Senior \_\_\_\_\_ Invit. \_\_\_\_\_ Jr. \_\_\_\_\_

Cart: No-Cart Plan \_\_\_\_\_ Trail Fee \_\_\_\_\_ Unlimited Cart \_\_\_\_\_ / Single-Couple-Family

Misc. Driving Range Only \_\_\_\_\_ Jr. Summer Only \_\_\_\_\_ Corporate \_\_\_\_\_

**Golf Only-SNOW BIRD Membership Plans**

**Golf Memberships:** 9 Month Option \_\_\_\_\_ 6 Month Option \_\_\_\_\_

Please check inactive months: Jan \_\_\_\_\_ Feb \_\_\_\_\_ Mar \_\_\_\_\_ Apr \_\_\_\_\_ May \_\_\_\_\_ June \_\_\_\_\_  
July \_\_\_\_\_ Aug \_\_\_\_\_ Sept \_\_\_\_\_ Oct \_\_\_\_\_ Nov \_\_\_\_\_ Dec \_\_\_\_\_

**Sports & Social Family Membership Options:**

Pool \_\_\_\_\_ Tennis \_\_\_\_\_ Pool & Tennis \_\_\_\_\_ 10 Rd Golf Card \_\_\_\_\_ Dining \_\_\_\_\_

**Member #** \_\_\_\_\_ **FOB #** \_\_\_\_\_ **FOB#** \_\_\_\_\_

Membership Sales: \_\_\_\_\_

General Manager: \_\_\_\_\_

**Terms and Conditions:**

1. The undersigned hereby **acknowledges receipt of a copy of the By Laws** of Legend Oaks Golf Operations, LLC and has read, understands and agrees to abide by all of its respective Terms and Conditions as amended from time to time. I also understand and agree that I, **my family and guests will abide by all the rules and policies** as set forth by the Legend Oaks Golf Club. The undersigned understands that membership at Legend Oaks Golf Club is subject to approval. **Initial** \_\_\_\_\_

1. **Resignation of Membership Privileges:** Club Members who desire to resign membership privileges must do so at the end of the calendar year during December as ALL MEMBERSHIPS ARE PERPETUAL AND AUTO-RENEW EACH YEAR. Resignations will not be accepted at any other time. They must also give the Club 30 day's prior written notice of their intention to resign their membership privileges. The resignation of membership privileges will become effective January 1<sup>st</sup> of the following year. Any outstanding dues, fees, or charges must be paid in full before the resignation will be accepted. There shall be no refund of membership initiation fees. **Initial** \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Legend Oaks Representative \_\_\_\_\_ Date \_\_\_\_\_