ΛΤΤΛΟΗΝΛΕΝΙΤ 1Λ

Personal Information Name						ATTACHI	
Type of Membership Desired Check One: Playing/Proprietary Discovery Young Executive (Ages 21-29) Young Professional (Ages 30-35) Special Social Firm Personal Information Name		\$1,000 INITA	TION FEE FO	R PLAYING/PROPRIETA	RY AND REGULAR FI	RM	
Check One: Playing/Proprietary Discovery Young Executive (Ages 21-29) Young Professional (Ages 30-35) Special Social Firm Firm Associates Personal Information Name	Tune of Momborship De	aired	9230.00 M				
Young Professional (Ages 30-35) Special Social Firm Firm Associates Personal Information Name		sirea					
Personal Information Name Current Address: Street City State Zip Code E-Mail Address Length of Time at Current Address Length of Time at Current Address Cell Phone Number Social Security Number Cell Phone Number Date of Birth Emergency Contact Name and Number and Number Single Married Divorced Widowed *SPOUSE, DOMESTIC PARTNER, SIGNIFICANT OTHER INFORMATION (if applicable): Spouse/Partner/Significant other: Name email address Telephone Number Date of Birth Wedding Anniversary Date Golf Privileges: Name Date of Birth YES Name Date of Birth YES		-					
Name	□ Young Professional (Age	s 30-35)	Special Soc	cial 🛛 🗆 Firm	🗆 Firm Associa	tes	
Name	Personal Information						
Current Address:	-						
Street City State Zip Code E-Mail Address Length of Time at Current Address Home Telephone Number	Name						
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ATTACHMENT 14

Business Information

Applicant's Occupation and/or Na	ture of Business or	Profession		🗆 Retired
Name of Company		Title		
Business Address				
Dusiness Talanhana	Street	City	State	•
Business Telephone Years in Present Employment		Business Fax		
Spouse's occupation and/or Name				
Business Address				
	Street	City	State	Zip Code
Business Telephone				•
Years in Present Employment		E-Mail Address		
Do you play golf?	How long have	e you played golf?	USGA Ha	andicap
Does your spouse play golf?	How long has	your spouse played golf? _	USGA Ha	ndicap
Reference Information				
Please list membership in other Cl	ubs fraternities so	rorities or organizations an	d nositions held	
ricuse list membership in other el		Torraciona di organizationa an		
Have you ever been proposed for	•	•	•	
Withdrawn? If so, please explain:				
I am acquainted with the following	g Merced Golf & Co	untry Club Members:		
Name			_ for	years
Name			_ for	years
Name			_ for	
Name			_ for	years

Authorization and Acknowledgment

By signing this application, I hereby authorize Merced Golf & Country Club, through its representatives, to make inquiry of my financial condition, our family and professional background and specifically authorize them to make inquiry of consumer credit reporting organizations. I certify that I have read this application and understand its contents.

The undersigned does hereby acknowledge, accept and understand that I have truthfully and to the best of my ability answered all application questions. If my application is granted, I agree to observe and be bound by the Bylaws and Rules and Regulations of Merced Golf & Country Club in the present form or as may be amended. I understand and agree that any dues, assessments and/or expenses of members are subject to modification by the Merced Golf & Country Club Board of Directors.

I also agree to maintain a current credit card account on file with the Club at all times. Should my account become delinquent, I agree the Club shall have the right to bill such past-due amount to my credit card. If I fail to pay my bill in full within thirty (30) days of the date payment is due I agree that the costs of collection, to include reasonable attorney's fees and all collection costs shall be awarded to the prevailing party in any litigation brought to enforce my obligations to the Club.

Card Type	Name as it appears on the Card	
Account Number	Security Code	Exp. Date
• •	inderstand that I am personally liable and responsible family members who utilize the Merced Golf & Count	с с
Signature of Applicant	D	Date

Signature of Spouse _____

Date		