



1 COUNTRY CLUB DRIVE, PO BOX 144
HUMMELS WHARF, PA 17831-0144
570-743-1714 www.golfsvcc.com

APPLICATION FOR MEMBERSHIP

Applicant Information

Applicant's Full Name _____

Birthdate _____ Email _____

Spouse / Partner Full Name _____

Birthdate _____ Anniversary Date _____

Email Address _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Applicant Employment Information

Place of Employment _____ Position _____

Address _____

City _____ State _____ Zip _____

Phone _____

Reference / Sponsor Member _____

Desired Category of Membership

- | | | |
|--|--|--|
| <input type="checkbox"/> Single Golf | <input type="checkbox"/> Family 1 Golf | <input type="checkbox"/> Family 2 Golf |
| <input type="checkbox"/> Single Social | <input type="checkbox"/> Family Social | <input type="checkbox"/> 4 Day Golf |
| <input type="checkbox"/> Pool | <input type="checkbox"/> Non-Resident | <input type="checkbox"/> Business |

Family Members

If applicable, please indicate family members who are to have Club privileges (must be enrolled as a full time student)

Name _____ Birthdate _____

1. Application and Acceptance of Rules

We/I hereby apply for a _____ Membership at Susquehanna Valley Country Club. If accepted, we/I agree to comply with and be bound by the Club's Rules and Regulations, however titled, as they now exist or may from time to time hereafter be amended, modified or supplemented. We/I understand that if this application is not accepted by the Club, all funds paid will be promptly refunded and this application shall be canceled and shall not be binding on either party.

2. Resignation

We/I understand that we/I may resign from the club at Calendar Year End by giving 30 days advanced written notice to the Club and by paying any outstanding dues or other charges including food, beverage, maintenance fees, golf shop charges, etc.

We/I have received, read and understand the terms and conditions contained in this membership application and agree to be bound by these terms and conditions.

Applicant Signature _____ Date _____

Club Representative _____ Date _____