



473 MARTZVILLE RD., BERWICK, PA 18603

570-752-6691

FAX 570-759-6475

Corporate Golfing Membership (November 1, 2009 to October 31, 2010)

Date _____

I hereby make application for golf membership in the BERWICK GOLF CLUB and agree, in signing this application, to conform to the constitution, by-laws, articles of incorporation and all rules and regulations of said club.

NAME _____

ADDRESS _____ PHONE _____ 2nd Phone _____

CITY _____ STATE _____ ZIP _____

CORPORATION _____

DUES \$1800.00-Must accompany application.

Includes 40 Rounds of Golf, including cart. Any one person may not use more than 10 golf passes

(Must be used by October 31, 2009)

New Memberships Only

No Food Minimum, No Assessments

You do not have the option of owning stock; therefore you have no voting privileges.

I understand my application for golf will be considered on a priority system. By signing this application, I am responsible for all dues starting November 1 to October 31.

Applicant Signature _____ Date of Approval _____

All applications subject to Board approval

Visa/Master Card/Discover accepted

Restrictions:

Weekends & Holiday play after 11:00 AM

You must have at least 3 people to tee off before 2:00 PM on weekends