

Application for WEEKDAY Fee Membership

Welcome

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Weekday Membership is valid Monday-Thursday and after 1200hrs Fri/Sat/Sun and Holidays
 (*note* some Holidays occur on Mondays)

Please complete this form thoroughly and turn in at the pro shop.
I.D will be required when you pick up your membership materials.

Name (Last, First, M.I)		Grade	SSN
			AGF#
Branch (Circle One)		Status (Check One)	
Army	USAF	Navy	USMC
USCG	DOD	Contractor	
		<input type="checkbox"/> Active <input type="checkbox"/> Retired <input type="checkbox"/> Reserve	
		Organization	

Home Address	Phone: (H) _____ (W) _____
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Golfing Dependent on Membership:
 1st _____ Add _____

WEEKDAY ANNUAL FEES 2010

Rank	Sponsor	1 st Fam Mbr	Add Fam Mbr
E1-E4	\$250.00	\$125.00	\$60.00
E5-E6 / GS1-3	\$325.00	\$160.00	\$80.00
E7-O3 / WO3 / GS4	\$480.00	\$240.00	\$125.00
O4 & up, WO4-WO5, GS7-9	\$675.00	\$340.00	\$170.00
GS10 & Up	\$825.00	\$415.00	\$200.00
Veterans	\$900.00	N/A	N/A
Distinguished Civilian	\$975.00	N/A	N/A

Club Storage \$60.00 # _____ Locker Rental: M--\$40.00 # _____ Handicap: \$25.00

Elec. Pull cart Storage: \$40.00 # _____ L--\$30.00 # _____ For _____

Online T-Times: \$10.00 _____ H Dep Only: _____

**** CIRCLE ALL APPLICABLE ITEMS. IF MORE THEN ONE, INDICATE QUANTITY****

Method of payment: Check payment method on the left and write the total amount.
 For Credit card Payment, Complete **** items also, if mailing in only.**

- _____ Visa
- _____ MasterCard
- _____ American Express
- _____ Discovery
- _____ Esprit
- _____ Check
- _____ Cash

**** Full name of Card Holder** _____

**** Card #** _____ ****Exp Date:** _____

**** Signature** _____

Total Amount: \$ _____

Date Received / Clerk (official use only)	Data Entry Date / Clerk (official use only)
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