



Official Use Only	
Accepted	_____
Member#	_____
Check #	_____
Amount	_____
Date Issued	_____

Application for 2011 Annual Membership

I am applying for the following type of membership:

- Regular Regular with Tennis Add-on Tennis Only

I will pay dues in the following category

- Individual Family (2 or more) Senior Senior (2 or more)
 Resident of Tega Cay Non-Resident

I want the billing information sent to:

- My home address My business address

By my signature below, I hereby apply for membership in *Tega Cay Golf Club*. Please list my name on the membership roster as follows:

Name: _____ (for office use only) SS# _____ DOB _____

ADDRESS & TELEPHONE INFORMATION

Name:	Phone (home)
Home Address	City/State/Zip
Business (Optional)	Phone (business)
Business Address	City/State/Zip

To receive club news and events, please provide your email address: _____

ELIGIBLE FAMILY MEMBERS

Name: _____	Birth Date: _____
Name: _____	Birth Date: _____
Name: _____	Birth Date: _____
Name: _____	Birth Date: _____

MEMBERSHIP

- My Membership will be held in name of _____ (Primary Member)

CONTINUED ON BACK

PAYMENT OPTIONS (Golf Memberships Only)

Prepay Annual Membership Fee-Greater Discount for Renewing Members in Good Standing

****PLEASE NOTE THAT PRE-PAY DISCOUNTS APPLY TO MEMBERSHIP FEES ONLY, THEY DO NOT INCLUDE MEMBERSHIP ADD-ONS, SUCH AS TENNIS, DRIVING RANGE, ETC.****

20% Discount-15% NEW MEMBERS--Must be Received by November 30, 2010

15% Discount – 10% NEW MEMBERS--Must be Received by December 31, 2010

10% Discount – 5 % NEW MEMBERS--Must be Received by January 15, 2011

I have enclosed my check for \$ _____ . Full Amount of Annual Dues

Pay with 12 Monthly Payments.

I elect to pay Tega Cay Monthly for my Annual Membership Fee. Please bill the following credit card monthly for the amount of \$ _____. January Payment of the Total Annual Fee.

Card Number _____ Exp. Date ____ / ____

REFUND

All Annual Fees for Tega Cay Golf Club is Non-refundable.

RESIGNATION

It is agreed that I may resign from *Tega Cay Golf Club* by giving thirty (30) days advance written notice to *Tega Cay Golf Club* and by paying all remaining annual fees and other monthly charges for which I may be liable. I shall not thereafter be subject to any further dues or other charges.

ASSESSMENTS

I understand that as a matter of contract with *Tega Cay Golf Club* my annual membership is non-assessable and that I am assuming no liabilities whatsoever in connection with my membership other than the payment of the full Annual Fee and charges incurred by me, my family, and guests in the use of *Tega Cay Golf Club* and that such membership does not confer upon me any ownership of *Tega Cay Golf Club* property or assets.

RULES & REGULATIONS

As an Annual Member, I agree to conform to, be bound by, and adhere to the Rules and Regulations of *Tega Cay Golf Club* as they may be amended from time to time.

Applicant's Signature

Date

PLEASE RETURN TO CLUB OR MAIL THIS APPLICATION TO:

**TEGA CAY GOLF CLUB
15803 Molokai Drive
Tega Cay, SC 29708**