



BAY CITY Country Club

Bay City Country Club Season Pass Application

Name _____

Date of Birth _____

Address _____

City/State/Zip _____

Email Address _____

Phone Number _____

Fees for Season Pass

Weekday Golf Pass

Monday – Friday

\$1895.00 (cart included)

- Includes one league fee per year
- Passholder guest rate: 10% off Daily rate
- 10% off apparel (does not include sale items - min. purchase of \$20)

**** ONLY VALID AFTER 12PM ON MEMORIAL DAY, INDEPENDENCE DAY, AND LABOR DAY***

Unlimited Golf Pass

Monday - Sunday

\$2395.00 (cart included)

- Includes one league fee per year
- Passholder guest rate: 10% off Daily rate
- 10% off apparel (does not include sale items - min. purchase of \$20)

Additional Family Member

\$300 (15 years & older)

\$150 (14 years & younger)

****If Additional Family Member pass is purchased for spouse or significant other, must include all family members living in household under the age of 25 & are full-time students**

Additional Family Members

Name _____

Relationship _____

Date of Birth _____

Name _____

Relationship _____

Date of Birth _____

Name _____

Relationship _____

Date of Birth _____

Authorization for Season Pass

All golf play must originate at the Pro Shop on assigned tees and tee-off times

The pass holder and guests will abide by general golf rules and regulations as established at the time of play and observe all normal golf etiquette.

If my application is granted, I agree to accept and understand that I am bound by the Bylaws and Rules and Regulations of Bay City Country Club, which includes termination of pass.

Applicants Signature _____

Date _____

Additional Family Member Signature _____

Date _____

Additional Family Member Signature _____

Date _____

Additional Family Member Signature _____

Date _____

For office use only:

_____ Approved _____ Denied

Payment Received _____

Annual Pass Expiration Date _____