

Membership Application



Type Of Membership

Full Regular Stockholder
\$1500 stock purchase

Entrance fee for Stockholder needs to be included with application.

APPLICANT INFORMATION

Name: _____ Birth Date: _____

Spouse (if applicable): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Home Phone Number: _____

Dependents Living At Home:

Birth Date:

Send Club Correspondence to my: Home Business

Business Name: _____ Position: _____

Type of Business: _____ Length of Employment: _____

Street Address: _____ City: _____

State: _____ Zip: _____ Email: _____ Business Phone Number: _____

Recommended by: _____

Sponsoring Member: _____

Sponsoring Member: _____

As an applicant for Membership, I agree to the following terms and conditions as they relate to joining Paola Country Club.

Terminations must be made in writing.

I hereby make application for membership in Paola Country Club, Inc. for which I agree to pay all dues and assessments as adopted by the Board of Directors. If elected to membership by the Board of Directors, I will abide by the rules, regulations and by-laws of Paola Country Club, Inc. as amended.

Signature of Applicant _____ Date _____