



2025 Plum Brook Country Club Membership Application

Revised 3/4/2025

Applicant does hereby willingly provide the following information to Plum Brook Country Club for consideration in obtaining membership acceptance. Applicant further agrees that Plum Brook may use any or all of the provided information in making its determination.

General Information

APPLICANT Name *

First Name Last Name

SPOUSE / SIGNIFICANT OTHER

First Name Last Name

APPLICANT PREFERRED Name

First Name Last Name

SPOUSE PREFERRED Name

First Name Last Name

PERSONAL Email *

SPOUSE / SIG OTHER Email

PERMANENT Address *

Street Address

OTHER Address

Street Address

City

State / Province

Postal / Zip Code

PERSONAL CELL Phone Number *

OTHER (HOME) Phone Number

SPOUSE PERSONAL CELL NUM

DATE OF BIRTH APPLICANT *

Month Day Year

DATE OF BIRTH SPOUSE

Month Day Year

APPLICANT EMPLOYER *

EMPLOYER ADDRESS *

Street Address

Street Address Line 2

City State Zip

EMPLOYER PHONE

Area Code

Phone Number

EMPLOYER EMAIL

example@example.com

POSITION / TITLE

CHILDREN / AGE (under age 25 living with applicant)

MEMBERSHIP TYPE

- Members paying a discounted rate will increase annually until they reach Full Dues level listed above. Increase is determined each year by the Board of Directors, currently \$500.00/Golf and \$250.00/Social.
- An annual Assessment, while rare, may be imposed by the Board of Directors.
- Monthly required food and beverage minimum is \$65.00. Non-Resident Category is for four months.
- There are NO refunds of Dues or Fees

Current Memberships Of Other Clubs/Organizations

Please List

Organization name / city & state / Office held if any

Past Memberships Of Other Clubs/Organizations

Please List

Organization name / city & state / Office held if any

Please List

Organization name / city & state / Office held if any

Please List

Organization name / city & state / Office held if any

Emergency Contacts

Emergency Contact #1 *

Contact 1 First Name Contact 1 Last Name

Emergency contact #1 Phone *

Area Code

Phone Number

Emergency Contact #2

Contact 2 First Name Contact 2 Last Name

Emergency contact #2 Phone

Area Code

Phone Number

Individuals Authorized To Charge To Applicant's Account

Signer #1

Contact 1 First Name Contact 1 Last Name

Signer #2

Contact 1 First Name Contact 1 Last Name

Signer #3

Contact 1 First Name Contact 1 Last Name

Signer #4

Contact 1 First Name Contact 1 Last Name

PLEASE ACKNOWLEDGE YOU HAVE RECEIVED Membership PRICING *

I have received and agree with the current pricing and payment plan structure from Plum Brook staff or Directors.

Acknowledgement

Applicant hereby acknowledges agreement with all Rules, Regulations and By-Laws of Plum Brook Country Club ("Club") and warrants use of the Club and privileges under the membership category desired are

subject to the terms, conditions and restrictions set forth therein. The Club, in its sole discretion, reserves the right to change or amend the Membership Categories, Dues, Assessments, Rules, Regulations, By-Laws and Code of Regulations, to terminate memberships and to discontinue operations of any or all of the Club facilities, either temporarily or permanently. Applicant warrants that the desired membership is for the sole purpose of obtaining recreational use of the Club facilities and not as an investment or for economic gain or profit.

DATE SIGNED

Month Day Year

PLUM BROOK COUNTRY CLUB

Received by: _____

Date: _____

Accepted this _____ day of _____, 20____