

CEDAR CREST COUNTRY CLUB

P.O. Box 3184
Quincy, Illinois 62305

Website: cedarcrestquincy.com
Email: clubhouse@cedarcrestquincy.com

APPLICATION FOR GOLD CORPORATE MEMBERSHIP
(Effective January 1, 2018)

The undersigned has applied for membership at Cedar Crest Country Club and agrees, if accepted, to abide by the constitution, by-laws, rules and regulations now amended.

HAVE YOU EVER BEEN A MEMBER AT CEDAR CREST COUNTRY CLUB? ___ YES ___ NO

Membership Type
Gold Corporate _____\$2,200

*Gold Corporate memberships include full golfing privileges for up to 4 people designated at the time of application. These 4 people must be owners or employees of the business and will have full golfing privileges as any other dues paying member. The Gold Membership also affords the Corporation to have 2 golf carts that can be stored in the member cart shed for the term of the membership. Those 4 designated people will have the ability to charge the corporate account as any other member, but the account is singular and not broken up by the 4 designated persons named at the time of membership.

** Current cart rental fees apply to the use of a Cedar Crest Club cart.

___ No Cart or Gas Cart ___ Electric Cart

Members paying trail fees are entitled to unlimited use of their cart at Cedar Crest Country Club. The loaning of privately owned carts is prohibited to anyone other than a current member. Storage space will be furnished as it becomes available.

Business Name _____

Address _____

_____ Phone _____

Email _____

List 4 designated owners/employees over 21 years of age who may charge to the club house corporate account.

Owner/employee name _____ Age _____

Owner/employee name _____ Age _____

Owner/employee name _____ Age _____

Owner/employee name _____ Age _____

Applicant agrees that membership shall be in effect continuously from year to year and notice of termination must be in writing no later than the end of the calendar year. This application will not be considered unless the first full year dues are included.

Signature of Owner _____ Date _____

Signature of Sponsor _____ Date _____

Please attach a listing of designated members on your business letterhead. Cedar Crest may request verification of employment for designated members.

For office use only.

Date Received _____ Sent to Board _____ Posted _____ Accepted _____