

**CEDAR CREST COUNTRY CLUB**

P.O. Box 3184  
Quincy, Illinois 62305

Website: cedarcrestquincy.com  
Email: cedarcrestquincy@gmail.com

**APPLICATION FOR MEMBERSHIP**

(Effective January 1, 2021)

**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	
Intermediate Junior (Ages 21-28)	___ \$ 300
Single Membership	___ \$ 600
Family Membership	___ \$ 1,100
Social Membership (Single or Family)	___ \$ 125

\*\*There are no monthly capital fees or minimums but must pay any assessments (this is subject to change).

\*\*\*Social memberships are not afforded golfing privileges but have full use of the clubhouse throughout the year and may attend all social functions. Social members may pay green fees to golf a maximum of 5 times.

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

Annual cart storage is \$200. There is an additional \$25 Fee for Electric Carts.

\_\_\_ No Cart\*                      \_\_\_ Gas Cart (\$200)                      \_\_\_ Electric Cart (\$225)

\*Please inform the clubhouse if you purchase a cart to be stored.

Members paying storage 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.

**AGE AS OF JANUARY 1<sup>st</sup> OF THE CURRENT CALENDAR YEAR**

Applicant Name \_\_\_\_\_ Age \_\_\_\_\_

Spouse Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

**List Children under 21 Years of Age living at home**

Child Name \_\_\_\_\_ Age \_\_\_\_\_

Child Name \_\_\_\_\_ Age \_\_\_\_\_

Child 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.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Sponsor \_\_\_\_\_ Date \_\_\_\_\_

*For office use only.*

Date Received \_\_\_\_\_ Sent to Board \_\_\_\_\_ Posted \_\_\_\_\_ Accepted \_\_\_\_\_