



2026 Membership Application

Greene County Country Club, Box 156, Jefferson, PA 15344, 724-883-4880, www.greenecountycc.com

Name: _____ Date of Birth: _____

Address: _____

Address: _____

PHONE: _____ Email: _____

| Type of Membership: | INDIVIDUAL** | FAMILY*** |
|---------------------|--|------------------------------|
| Full Membership | <input type="radio"/> \$1602 | <input type="radio"/> \$1882 |
| Junior Membership | <input type="radio"/> \$336 | |
| Distance Membership | <input type="radio"/> \$560 | |
| Weekday/Weekend | <input type="radio"/> \$1064 | |
| Swing Lab | <input type="radio"/> \$50 (November 16 th through March 31 st only) | |

** All members are required to spend \$30.00 per month on food April-October

*** Family Information: Please provide name and birth dates of family members that will be included in the Family Membership. A child's membership shall expire when that child reaches the age of 18, unless that child is attending college or school beyond high school. This does not include additional schooling such as graduate school, pre-med, etc.

Name: _____ Birthdate: _____ Name: _____ Birthdate: _____

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I hereby apply for membership for the Greene County Country Club and agree to pay the required dues and fees in the amounts fixed by the By-Laws for the membership for which application is being made, and which are in effect during the time I remain a member. All dues are subject to change by the Board of Governors.

Signature of Applicant: _____ Date: _____

Sponsored By: _____ Approval Date: _____