

The Eureka Country Club

1563 N. River Road
P.O. Box 543
Eureka, KS 67045

Application

I/We the undersigned hereby apply for the membership in the Eureka Country Club for the membership type indicated below. If accepted and approved by the Board of Directors, I/We agree to abide by the rules, regulations and by-laws of the Club. It is also understood by the Applicant or Applicants that any monthly statement is due and payable by the 20th of each month. If not paid in full by the 20th, I/We will incur a late fee on any unpaid balance.

Stockholder Family Membership - It is understood that the member, their spouse and all members of their immediate family including students under the age of 23 are entitled to the use of all facilities and privileges offered by the Club, including the **rights and privileges of a Stockholder**. **Stockholder Family Dues** are \$123.15* per month and \$25 restaurant minimum, \$100 Stock (one-time fee – refundable)

Stockholder Single Membership - It is understood that the Member alone is entitled to the use of all facilities and privileges offered by the Club, including the **rights and privileges of a Stockholder**. **Stockholder Single Dues** are \$112.96* per month and \$25 restaurant minimum, \$100 Stock (one-time fee – refundable)

Associate Family or Associate Single Membership - It is understood that the member enjoys the same use of the facilities as the Stockholder Family or Single membership, but **without the rights and privileges of a Stockholder**. This membership is for a maximum two-year lifetime period. After two years of Associate membership, the membership must be promoted to a Stockholder membership or be canceled. **Associate Family Dues** are \$107.41* per month and a \$15.00 restaurant minimum. **Associate Single Dues** are \$97.22* per month and a \$15.00 restaurant minimum.

Social Family or Social Single Membership - It is understood that the member enjoys the same use of the facilities as the Stockholder Family or Single membership, but **without the rights and privileges of a Stockholder** and **without the use of the Golf Course facilities**. The Social membership can be advanced to an Associate or Stockholder membership at any time. **Social Family and or Single Dues** are \$41.20* per month and \$30 per month restaurant minimum with no stock purchase.

Non-Resident Family or Non-Resident Single Membership - It is understood that the member enjoys the same use of the facilities as the Stockholder Family or Single membership, but **without the rights and privileges of a Stockholder**. The member must have a primary residency located outside a 30-mile radius from The Eureka Country Club. **Non-Resident Single Membership Dues** are \$71.76* per month dues with no restaurant minimum. **Non-Resident Family Dues** are \$76.85* per month dues with no restaurant minimum.

(*Sales Tax will be added to all Dues & Monthly Minimums.)

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Membership Application

I/We the undersigned hereby apply for the membership in the Eureka Country Club for the membership type indicated below. If accepted and approved by the Board of Directors, I/We agree to abide by the rules, regulations and by-laws of the Club. It is also understood by the Applicant or Applicants that any monthly statement is due and payable by the 20th of each month. If not paid in full by the 20th, I/We will incur a late fee on any unpaid balance.

- Stockholder Family Membership**
- Stockholder Single Membership**
- Associate Family Membership**
- Associate Single Membership**
- Social Family Membership**
- Social Single Membership**
- Non-Resident Family Membership**
- Non-Resident Single Membership**

Address of Primary Residence if applying for Non-Resident

For any of the memberships above, I/We agree to pay the dues and minimums as indicated. My membership will be continued at the monthly rates/time frame indicated unless CANCELED IN WRITING by myself. I/We understand my membership much be canceled in writing or I/We will be responsible for all charges incurred. Upon termination of membership, should I have an outstanding balance, I/We understand this balance must be paid in full before I/We are released of responsibilities. This includes dues, restaurant minimum and any assessments the Board of Directors deem appropriate.

The first month's dues and stock (if applicable) are due with this application. Sales tax will be added to the dues and restaurant minimum.

Signature of Applicant Member

Office use only

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Date application was received: _____ Amount Received: _____

Date of Board Approval: _____

Name: _____ D.O.B. _____

Spouse's Name: _____ D.O.B. _____

Anniversary Date: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____

Address: _____

E-Mail Address 1: _____

E-Mail Address 2: _____

Child #1 Name: _____ D.O.B. _____

Child #2 Name: _____ D.O.B. _____

Child #3 Name: _____ D.O.B. _____

Child #4 Name: _____ D.O.B. _____