



MEMBERSHIP APPLICATION

Membership Type	Up to March 31, 2024	After March 31, 2024
Single – Full Membership	850	890
New Member	600	600
Husband/Wife	1475	1515
Family (Includes one child. Each additional child \$80)	1575	1615
Student: (High School & Younger)	200	225
College Student: (Age 22 or less)	300	325
Cart Card	575	575
Cart Card – League Night ONLY (Twilight/Starlight)	185	185
Please make checks payable to AVCC		
	TOTAL DUE	\$

You may also pay by Credit Card: **Subject to additional 3% fee******

(PLEASE CIRCLE TYPE) MasterCard Visa American Express

Expiration Date: _____ Card Number: _____

Signature: _____

MEMBERSHIP TO BE IN THE NAME OF:

1st Member: _____ Date of Birth: _____

2nd Member: _____ Date of Birth: _____

3rd Member: _____ Date of Birth: _____

4th Member: _____ Date of Birth: _____

Mailing Address: _____ Town/City: _____

State: _____ Zip Code: _____

Phone #: _____ E-mail: _____

Please remit to: Androscoggin Valley Country Club
 PO Box 280
 Gorham, NH 03581

WWW.AVCCGOLF.COM

