



## Application for Membership to The Stuttgart Country Club

Nume.		Date:
Mailing Address:	Email Address:	
Place of Business:		Position:
Spouse Name:		Occupation:
Please list Children & Birth-	·date(s):	
Clubs & Fraternal Organiza	ations:	
Church Affiliation:		
Please list 2 Member Refer	rences:	
Bank:		
Select Membership Type:		
Active Junior Soci	al Restaurant Nor	n-Resident Over 65
Junior Applicant: Provide Birt	th-date:	
Recommended by: (Signature	e of 2 Active Members with a Minimum	n of 2 years Membership)
application is accepted, I agree	e to comply with the rules and	regulations of The Stuttgart Country Clu
icant Signature	Date Approved	Secretary