



PO Box 400 • Petoskey, MI 49770

## APPLICATION FOR MEMBERSHIP

I hereby make application for membership in Petoskey - Bay View Country Club, and agree to be bound by all of the by-laws, rules, and regulations of said club. This application is subject to the approval of the Membership Committee and the Board of Directors.

Today's Date \_\_\_\_\_

Questions: contact call Linda 231-347-2148 lbarrows@pbvcc.com

Family Membership \_\_\_\_\_

Individual Membership \_\_\_\_\_

Senior Membership

Associate Membership

Social Membership

(under age 40-copy of drivers license required )

Legacy Membership

Trial Membership

Young Adult Membership (age 23-30)

(child or grandchild of current member)

(copy of drivers license required)

Monthly Statements - email to send statements \_\_\_\_\_

Former PBVCC Member? \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Approx. Handicap \_\_\_\_\_

Spouse/Significant Other \_\_\_\_\_ Birthdate \_\_\_\_\_ Approx. Handicap \_\_\_\_\_

Dependent Children (under age 23):

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Play golf? \_\_\_\_\_ Approx. Hdcp. \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Play golf? \_\_\_\_\_ Approx. Hdcp. \_\_\_\_\_

Home Address \_\_\_\_\_ How Long? \_\_\_\_\_

Cell Phone \_\_\_\_\_

Local Address \_\_\_\_\_ Spouse Cell \_\_\_\_\_

Seasonal? \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Spouse E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

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

How Long? \_\_\_\_\_

Were you referred by a current PBVCC member? If yes, their name \_\_\_\_\_

**PERSONAL REFERENCE:** (Preferably PBVCC member)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Please enclose with this application for membership your check for \$1,000.00.  
Upon admission, the \$1,000 deposit will be credited to your dues.  
For Trial Members, this deposit assures your position on our waiting list.