

Starmount Forest Country Club

Membership Application



*One Sam Snead Drive
Greensboro, NC 27410
336-299-0425
www.starmountforest.com*

Business Information

Applicant's Employment and/or nature of Business for past 10 years:

Company _____ Years with Company _____

Title _____ Telephone _____ Fax _____

Address _____ Zip _____

Previous Company _____ Years with Previous Company _____

Title _____ Telephone _____ Fax _____

Address _____ Zip _____

Work Email Address _____

Spouse's Employment and/or nature of Business:

Company _____ Years with Company _____

Title _____ Telephone _____ Fax _____

Address _____ Zip _____

Email Address _____

Bank References

1. _____
Name of Institution _____ Address _____

Officer to Contact _____ Account Number _____ Telephone _____

2. _____
Name of Institution _____ Address _____

Officer to Contact _____ Account Number _____ Telephone _____

Sponsoring Member of Starmount Forest Country Club:

_____ Member Name _____ Sponsoring Signature

One existing members of Starmount Forest Country Club who is endorsing application for membership:

_____ Member Name _____ Endorsee's Signature

Approval for Membership:

I hereby apply for membership in Starmount Forest Country Club (the "Club"). I understand: (I) this application for membership privileges will not be acted upon unless fully completed, signed and accompanied by a check for the initiation fee and operating dues as required by the Club; (II) Membership is contingent upon approval, which approval shall be in the Club's sole and absolute discretion; (III) applicants will be notified by the Club of the action taken by the Club on this application; (IV) If this application is not approved, all funds deposited by the applicant herewith shall be refunded immediately, without interest, and this application shall become null and void.

Authorization for Release of Information:

Upon signing this Application for Membership privileges, I hereby authorize the disclosure and release of information to Starmount Forest Country Club for investigating my qualifications for membership, and authorize those persons or entities listed as references herein to furnish information to Starmount Forest Country Club upon request. I understand that acceptance for membership in Starmount Forest Country Club is subject to approval by the Starmount Forest Country Club Board of Directors and payment of the required membership fees, dues and other charges as may be charged from time to time.

Payment of Membership Fee:

The undersigned hereby applies for _____ membership in the Club and agrees to pay the Club initiation fee of \$ _____, for these membership privileges. A check in the amount of \$ _____, made payable to Starmount Forest Country Club, covering initiation fee and one (1) month's dues and capital charges is attached. I agree to be bound by the terms and conditions thereof, as amended from time to time, in the sole discretion of the Club. Membership privileges may be terminated by the Club for failure to abide by Membership Conditions, Rules, By-laws and Regulations.

Signed: _____
Applicant Date

Signed: _____
Spouse Date

Club Action: _____
Membership Chairman Date Approved

Date Received: _____ Member No: _____

Name: _____ Type: _____