

LAKE VIEW COUNTRY CLUB

Golf / Social Membership Application

I HEREBY APPLY FOR AN ANNUAL MEMBERSHIP AT LAKE VIEW COUNTRY CLUB

Name _____

Address _____ City _____ State ____ ZIP _____

Phone _____ E-Mail _____

Date of Birth _____ Employer _____

Occupation _____

Sponsor: _____

For Family Memberships, include the following information:

Name of Spouse _____ Date of Birth _____

Children _____ Date of Birth _____

Children _____ Date of Birth _____



I / We desire to become a member of Lake View Country Club and if approved will faithfully comply with the Articles of Incorporation and by-laws and agree to be bound by the terms and conditions of the Membership Application.

Billing Preference: Annual _____ Monthly _____

Signature of Applicant: _____ Date _____

Type of Membership Desired. Please check one of the following:

"A" Voting Class	Monthly	Annual	"B" Non Voting Class	Monthly	Annual
_____ Family	\$388	\$4,656	_____ Clergy	\$128	\$1,536
_____ Individual	\$296	\$3,552	_____ Non-Resident	\$178	\$2,136
_____ Intermediate	\$218	\$2,616	_____ Non-Resident Family	\$233	\$2,796
_____ Intermediate Family	\$282	\$3,384	_____ Social	\$40	\$480
_____ Restricted Individual	\$237	\$2,844	_____ Corporate Social	NA	\$560
_____ Retired Family	\$350	\$4,200	_____ Associate Corporate Social	NA	\$260
_____ Retired Individual	\$272	\$3,264	_____ Junior	NA	\$400
_____ Corporate Individual	\$296	\$3,552			
_____ Corporate Family	\$388	\$4,656			
_____ Buddy Membership	NA	**Cost is 50% of applicable membership. Refer to website for details.			

**** Buddy Membership Payment: 50% with application, remainder due by June 1st (After June 1st 100% w/application)**

For Office Use Only: Membership # _____ Membership Chairman _____ Approval Date: _____

Deposit Amount: _____ Date Received: _____ Amount remaining: _____ Date Received: _____

**Lake View Country Club • 8351 Route 89, P.O. Box 468 • North East, PA 16428
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Website: www.lakeviewcc.com**