



Membership Application

Membership Number: _____

Activation Date: _____

Type of Membership Requested:

_____ Equity Golf or Social _____ Annual Golf or Social _____ Other: _____
(specify)

APPLICANT INFORMATION: (PLEASE PRINT)

Full Name (Mr/Mrs/Ms) _____ Spouse _____

Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Email Address _____

Address (Billing address if different from above) _____ City _____ State _____ Zip Code _____

Employer _____ Work Phone _____

Dependents under 23 living at home or in college:

Name _____ Date of Birth _____

Name _____ Date of Birth _____

I understand, and agree to abide by, the rules and regulations of Timberlake Country Club, Inc. and enclose the appropriate fees for the category of membership to which I am applying. Membership costs are per household. I understand that this application is subject to approval and acknowledge that, in the event that it is declined, TCC, Inc. is not obliged to justify its decision.

Applicant's Signature _____ Date _____

Approved By _____ Date _____