 

**Tennis Membership Application**

 **Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Accepted\_\_\_\_\_\_\_\_\_\_**

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Applicant’s name Spouse’s name

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Address City State Zip Code

(\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number E-mail *used only for club purposes.*

Would you like to receive invoices by email or mail? Email\_\_\_\_ Mail\_\_\_\_

How did you hear about Windyrush Country Club? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Children at Home:**

**First Name Last Name Age M/F**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Initiation fee Payment

\_\_\_$1000.00 \_\_\_\_\_\_\_\_\_\_

**Dues**

\_\_\_\_ $700.00

 **Total Paid** $\_\_\_\_\_\_\_\_\_\_\_

*I, the undersigned, do hereby make a formal application to the Windyrush Country Club. If my application is accepted, I agree to abide by the rules and by-laws of the club. I agree that my membership is not transferable.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mail checks to:** Windyrush Country Club

**Applicant’s signature** 6441 Windyrush Road

 Charlotte, NC 28226 **or**

 **Credit card payment please email**

office@windyrush.com

Please add email address for family members who want to be informed about Windyrush events and information.

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