

YORK COUNTRY CLUB

P.O. Box 148 • West Elm Street • York, Nebraska 68467
 www.yorkcountryclub.net
 email: office@yorkcountryclub.net



APPLICATION FOR MEMBERSHIP

Membership Classification Social Golf Student Out of County

Applicant's Name _____ Birth Date

MONTH	DAY	YEAR
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Spouse's Name _____ Birth Date

MONTH	DAY	YEAR
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Address _____ Phone _____
city state zip county e-mail _____

Place of Employment _____ Phone _____

Name and **BIRTH DATES** of Dependent Children (or dependent college students) Living at Home _____

Name	Birthdate	M / D / Y	Name	Birthdate	M / D / Y
Name	Birthdate	M / D / Y	Name	Birthdate	M / D / Y

Are you a member of another country club Yes No

If yes, please give name and address, membership number, phone number

INITIATION FEE \$ _____

STOCK CERTIFICATE \$ _____

MEMBERSHIP FEE \$ _____

- Will pay monthly
- Will pay annually

FOR OFFICE USE ONLY	
#	_____
M	_____
AR	_____
L/C	_____
S	_____
P	_____

The undersigned hereby applies for membership in York Country Club, a non-profit corporation, and binds himself by the Bylaws, rules and regulations of said club; will pay the dues and assessments as established by the Board of Directors for the entire calendar year ending in December and hereafter established. Membership is not transferrable and is continuous until canceled in writing.

Signature of Applicant _____

Approved by the Board on: _____ Stock Certificate No. _____