

TOWANDA GOLF CLUB
645 GOLDEN MILE RD
TOWANDA, PA 18848
570-265-6222

**GOLF MEMBERSHIP
2024 APPLICATION
TOWANDA GOLF CLUB**

PRIMARY APPLICANT INFORMATION. (if independent student*, fill this in)

Last Name:	First Name:	Birth Date:
Street Address:	City:	State, Zip:
Home Phone:	Cell Phone:	Email:

SECONDARY APPLICANT INFORMATION

Last Name:	First Name:	Birth Date:
Street Address:	City:	State, Zip:
Home Phone:	Cell Phone:	Email:

DEPENDENT STUDENT APPLICANT INFORMATION*

Name:	Birth Date:
Name:	Birth Date:
Name:	Birth Date:

***STUDENTS MUST EITHER BE 18 & UNDER, OR AGE 19-25 AND A FULL-TIME STUDENT IN COLLEGE OR EQUIVALENT TO QUALIFY FOR A STUDENT MEMBERSHIP.**

DEPENDENT VS INDEPENDENT DEFINED: DEPENDENT STUDENTS ARE PART OF A PARENT/GUARDIAN ACCOUNT. INDEPENDENT STUDENTS ARE NOT.

MEMBERSHIP BENEFITS

- 10% DISCOUNT ON FOOD AND MOST MERCHANDISE PURCHASES
- PREFERRED TEE TIMES – 2 WEEK PRIOR BOOKING FOR WEEKENDS AND TOURNAMENT DAYS
- ACCESS TO MEMBER ONLY EVENTS
- ACCESS TO MEMBER TOURNAMENTS
- RECIPROCAL WITH OTHER CLUBS
- GHIN HANDICAP FEES WAIVED
- MEMBER CHARGE PRIVILEGES

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2024 MEMBERSHIP PRICING

<u>Category</u>	<u>Age</u>	<u>DUES</u>
Single	18 – 30 years	\$1300/year
Single +1*	18 – 30 years	\$1700/year
Single	31 - 64 years	\$1500/year
Single +1*	31 - 64 years	\$1900/year
Senior Single	65 and over	\$1300/year
Senior Single +1*	65 and over	\$1700/year
Independent Student	18 & Under	\$250/year
Independent Student	19 – 25 years	\$400/year
Dependent Student	12 – 25 years	\$100/year
Non- Resident	21+ years	\$650/year

Member Only Annual Cart Pass:

Single \$800/year
Additional \$500/year

Member Only Bag Storage \$100/year

*+1 applicable to spouse / domestic partner / significant other

** Bag Storage includes regular club washing. Space limited.

Primary Member Signature _____ Date _____

Secondary Member Signature _____ Date _____

If Independent Student is a minor, parent/guardian sign on Secondary Member line.

Payments may be made by Check and mailed to the Club or in person by cash or credit card.

A 3% fee will be applied to credit card

INTERNAL USE ONLY

Amount of Deposit _____

Date _____ Initial _____

Member Number _____

Yearly Dues Amount _____