

# Breakfast Hill Golf Club

## 2012 APPLICATION FOR MEMBERSHIP



Name #1: \_\_\_\_\_

Name #2: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_ GHIN Number: \_\_\_\_\_

Birthday: \_\_\_\_\_

Please indicate your membership selection. Payments can be made by cash, check or credit card (Visa, MasterCard, or Discover).  
 Make checks out to: **Breakfast Hill Golf Club; 339 Breakfast Hill Road; Greenland, NH 03840.**

**FULL** \_\_\_\_\_ Individual (\$2,300)  
 Add \$1,500 for additional partner in same household  
 \_\_\_\_\_ Student (\$500 - \$250 for each additional sibling)

**WEEKDAY** \_\_\_\_\_ Individual (\$1,500)  
 Add \$550 for additional partner in same household

**BREAKFAST CLUB** \_\_\_\_\_ Individual (\$400)  
 Breakfast Club membership includes a punch card good for 20, nine-hole rounds that are transferrable and never expire;  
 Breakfast Hill Golf Club is NOT responsible for lost or stolen cards.

**UNLIMITED CART** \_\_\_\_\_ Individual (\$500)

**OFFICE USE ONLY**

Payment #1 Amount: _____	Date: _____	Payment Type: _____	Init: _____
Payment #2 Amount: _____	Date: _____	Payment Type: _____	Init: _____
Type of Card/Credit Card #: _____	Expiration Date: _____		
Date faxed/mailed to Breakfast Hill: _____	Employee Initials: _____		

I/We have completely read and understand the Breakfast Hill Golf Club Rules and Regulation package. I/We accept and agree to be bound by all Club policies mentioned therein. I/We agree to abide by all the rules and regulations stated therein.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full or weekday members pay split pay their memberships with half due at sign-up and the balance due by March 1, 2012. Please ask a Golf Shop attendant for more details.

