



THE COUNTRY CLUB OF LEXINGTON

1066 Barr Road, Lexington, SC 29072

SOCIAL MEMBERSHIP APPLICATION

Date Received _____ Time Received _____
 Membership Number # _____ Activation Date _____

Attach \$350 Retainer Fee. This will apply towards Initiation Fee.

To the Board of Directors of the Country Club of Lexington:

I hereby make application for a social membership, as described on the reverse side of this application, in the Country Club of Lexington. I agree to abide by the Constitution, By-laws, Rules and Policies of said Club and all subsequent amendments, additions and alterations that may be made thereto.

PRINT CLEARLY OR TYPE ALL INFORMATION – both sides

MEMBER'S INFORMATION

MEMBER'S FULL NAME _____ Preferred name (i.e. nickname) _____

Date of Birth _____

Home telephone number _____ Cell/Mobile telephone number _____

Home Physical Address _____

Mailing Address (if different) _____

Email address _____

Occupation/Job title _____ No. of years with Business _____

Business Name _____

Business Address _____

Business telephone number _____ Fax _____

Previous Employer _____

Credit Reference (personal Bank and Location) _____

Have you been convicted of, pleaded guilty, or no contest to, or been convicted of any misdemeanor or felony? (Exclude minor traffic violations). (Circle one): **YES NO** If Yes, please explain. (Will not necessarily exclude you from consideration) _____

► **SIGNATURE** (Applicant) _____ Date _____

SPOUSE'S INFORMATION

SPOUSE'S FULL NAME _____ Spouse's Preferred name (i.e. nickname) _____

Date of Birth _____

Occupation/Job title _____ No. of years with Business _____

Business Name _____

Business Address _____

Business telephone number _____ Cell/Mobile telephone number _____

Email address _____

Previous Employer _____

Have you been convicted of, pleaded guilty, or no contest to, or been convicted of any misdemeanor or felony? (Exclude minor traffic violations.) (Circle one): **YES NO** If Yes, please explain. (Will not necessarily exclude you from consideration) _____

► **SIGNATURE** (Spouse) _____ Date _____

Proposed By _____ Date _____

Endorsed By _____ Date _____

Endorsed By _____ Date _____

Print Names

Signatures

Comments of Applicant, Sponsor and Endorsers: _____

Only COMPLETED applications will be considered by the Board of Directors (including signatures of applicant, spouse (if applicable) and Proposed/Endorsed by). Per CCL By-laws, applications require signatures of two (2) active members. If necessary, an interview with the Membership Committee may be requested in lieu of signatures. Committee members would meet the signature requirements if application passes through committee for consideration by the Board of Directors. All information on this form is **STRICTLY CONFIDENTIAL** . . . to be used by **The Country Club of Lexington – ONLY!**

FAMILY INFORMATION

Please list the names of all your dependent children, *(Age limit and requirements described in CCL By-laws)*

FULL NAME <i>(Nickname)</i>	DATE OF BIRTH	SCGA HANDICAP	RANGE FEE	INTEREST
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				

IN CASE OF AN EMERGENCY, PLEASE NOTIFY *(list name and phone number)* _____

PRESENT AND PAST CLUB MEMBERSHIPS *(List the Club, location and number of years as a member):*

1. _____
2. _____
3. _____

ADDITIONAL INFORMATION - *This section is optional and we appreciate your input by completing the following. Thank you.*

Please circle which club activities you and your family have an interest in participating.

Charges to club account	Member	Spouse	Children <i>(requires signed consent form)</i>
Annual Driving Range Access (\$150 per person) <i>Non-refundable. Automatically renews each January.</i>	Member	YES	NO
	Spouse	YES	NO
	Children – enter YES or NO by each child in dependent section		
Account Draft Payment Option <i>(application on website)</i>	YES	NO	
Tennis courts <i>(general use)</i>	Member	Spouse	Children
Tennis League	Member	Spouse	Children
Tennis lessons	Member	Spouse	Children
Tennis clinics	Member	Spouse	Children
Pool	Member	Spouse	Children
Swim lessons <i>(children)</i>			Children
Swim team <i>(participant or parent committee)</i>	Member	Spouse	Children
Social functions <i>(Holidays/Special Occasions)</i>	Member	Spouse	Children

Please list any additional information you would like noted on your records.

SOCIAL MEMBERSHIP DESCRIPTION: A social membership includes the use of the clubhouse, pool, and tennis courts. There is an optional Annual Range Fee **per individual** to use the Practice Facility/Driving Range only. This fee is **non-refundable, is not prorated January-August** (½ rate September-December), and is automatically renewed each January unless the club office is notified. Must sign in at Golf Shop prior to each use and is for use of the individual associated with the fee only. Abuse of the annual range program may result in loss of privileges with no refund. A social member will also be allowed to make a reservation to golf play twice a month, Monday through Saturday after 12 o'clock noon, and pay a green fee and cart rental. A social member cannot play in a tournament as a member. A social member will have priority, after the ex-dependent and inactive member's reactivation request, to become a full time member and the initiation fee will be reduced by the amount paid for the social membership initiation fee. A former social member, who left the club in good standing within the past three (3) years and desires to be reactivated, will pay a reactivation fee equal to the current social initiation fee, and would not qualify for any reduced initiation fee offers or promotions. ***The Social Member has no voting privileges.***

Please make sure both sides are complete. Thank You.