



Confidential Application for Club Membership

Name:		Spouse:	
Address:			
City/State/Zip:			
If less than 3 years at above address, please list former address:			
Publish home address in Club Directory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Publish phone number in Club Directory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Publish e-mail(s) in Club Directory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Home Phone:		Home Fax:	
Bank/Credit Reference (not a credit card):			
Billing Address (please check one):		Home <input type="checkbox"/>	Business <input type="checkbox"/>
<i>Your Information</i>		<i>Spouse Information</i>	
SSN:		SSN:	
Date of Birth:		Date of Birth:	
Personal E-mail:		Personal E-mail:	
Wedding Anniversary:			
Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>		Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>	
Profession:		Profession:	
Company Name:		Company Name:	
Address:		Address:	
Phone:		Phone:	
E-mail:		E-mail:	
<i>Children Using The Club</i>			
Child 1:	Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>		
Birthday:			
Child 2:	Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>		
Birthday:			
Child 3:	Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>		
Birthday:			
Child 4:	Interests (check all that apply): Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Swim Team <input type="checkbox"/> Bridge <input type="checkbox"/>		
Birthday:			

Single-level Membership	Monthly Dues	Quarterly Food Min.	Stock Purchase	Initiation Fee
Full Privileges	\$240.00	\$10.00	Waived	\$500.00
Young Professionals	\$120.00	\$10.00	Waived	Waived
One year contract required.				

I understand that the foregoing form constitutes my application for membership in Hunting Hills Country Club, Inc (Hunting Hills Country Club) and I certify that the information presented in my application is true and correct. I further understand that one current member of the Club must act as my sponsor by completing and attaching a completed Sponsor Form to this application for membership; that I must also provide a second signature of recommendation; and that my name will be posted as an applicant for membership immediately upon the Club’s receipt of the application and will remain posted for a minimum of two weeks before Board approval can be given.

If I am accepted as a member of Hunting Hills Country Club, I agree to the following:

1. To pay to Hunting Hills Country Club the annual dues and any other required fees as established by the Board of Directors, as well as all other charges incurred by me and by authorized members of my family for the use of Club facilities and services, all according to the schedule of charges and payment terms from time to time established by the club management and Board of Directors. My annual dues will be billed in monthly installments.
2. The initial term of my membership shall run from the date that my application is accepted by the Club (“the Acceptance Date”) through the last day of the month in which the first anniversary of the Acceptance Date occurs; thereafter, the term will be month-to-month. My obligation to pay dues will commence on first day of the calendar month next following the month in which the Acceptance Date occurs, and I am obligated to pay dues for each of the 12 full calendar months, with the exception of the first month of membership and the last month of the 14 month period, following the Acceptance Date. After completion of that initial 14 month term, I may resign at any time by giving written notification of my intent to resign. My resignation will become effective thirty days from the end of the month in which it is received by the Club. The Club may terminate my membership at any time for cause, including, but not limited to, failure to pay dues, fees or other charges. I may not assign either the privileges of membership or the obligation to pay applicable dues, fees and other charges.
3. To pay a monthly finance charge of 1.5% (18% APR) of any balance on my member account that remains unpaid for thirty (30) days after the billing date. In addition, should the Club engage an attorney in connection with the collection of any account I owe to the Club, I agree to pay as reasonable attorney’s fees an amount equal to 25% of the balance being collected. I agree that the venue for any litigation concerning this contract shall be in Roanoke County, Virginia. I hereby waive the benefit of the Homestead Exemption with respect to any amount I owe to the Club.
4. To comply with the Bylaws of the Club in effect from time to time and with all Rules and Regulations adopted by the Board of Directors with respect to use of Club facilities and services. I acknowledge that I have received a copy of the Bylaws and the Rules and Regulations currently in effect.

Signature of Applicant: _____ Date: _____

Signature of Spouse: _____ Date: _____



COUNTRY CLUB

Names of Applicant (s):

How long have you known Applicant(s)?

How do you know Applicant (s)?

How do you think Applicant (s) will use the Club? (check all that applies)

Business__ Social Activities__ Golf__ Tennis__ Pool__
Children's Activities__ Jr. Golf__ Jr. Tennis__ Swim Team__

Please write a few comments about how you think Applicant(s) will not only enjoy Hunting Hills Country Club but will also be an asset to our membership?

I certify that the information given by me is true to the best of my knowledge. In signing this form, I am representing Applicant(s) for membership in Hunting Hills Country Club.

Signature:

Date: _____

Please print your name here: _____

Signature of 2nd Sponsor: _____ Date: _____

Please print your name here: _____

Hunting Hills
COUNTRY CLUB