

APPLICATION FOR SEASONAL MEMBERSHIP

APPLICANT'S NAME _____ DATE OF BIRTH _____ MARRIED _____ SINGLE _____

SPOUSE'S/SIGNIFICANT OTHER'S NAME (CIRCLE ONE) _____ DATE OF BIRTH _____

PRIMARY RESIDENCE _____
TELEPHONE _____

SECONDARY RESIDENCE _____
TELEPHONE _____

E-MAIL ADDRESS _____

REFERRED BY: ___ MEMBER ___ REALTOR _____

PLEASE LIST ALL CHILDREN:

LIST BY NAME	DATE OF BIRTH	MALE / FEMALE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

BUSINESS

APPLICANT'S OCCUPATION _____ TITLE _____

EMPLOYER _____ TELEPHONE () _____

SPOUSES OCCUPATION _____ TITLE _____

EMPLOYER _____ TELEPHONE () _____

REFERENCES

BANK REFERENCE _____

CREDIT CARD REFERENCE _____

OTHER COUNTRY CLUB AFFILIATIONS _____

MEMBER REFERENCE, IF APPLICABLE _____

CREDIT CARD NUMBER _____ EXPIRATION _____

PLEASE INDICATE MEMBERSHIP CATEGORY DESIRED:

- | | | | | | |
|--|------------------------------------|-------------------------------------|---------------------------------------|------------|----------|
| <input type="checkbox"/> SEASONAL GOLF FAMILY - PLATINUM | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL GOLF SINGLE - PLATINUM | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL GOLF FAMILY - GOLD | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL GOLF SINGLE - GOLD | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL TENNIS FAMILY | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL TENNIS SINGLE | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |
| <input type="checkbox"/> SEASONAL SOCIAL | <input type="checkbox"/> ONE MONTH | <input type="checkbox"/> TWO MONTHS | <input type="checkbox"/> THREE MONTHS | FROM _____ | TO _____ |

I, _____, hereby apply for a Seasonal Membership in The Meadows Country Club, Inc., in the dues category indicated. Attached is my check for the Dues in the amount of \$_____ payable in U.S. Funds to The Meadows Country Club. Please use the credit card listed on this application for my Dues in the amount of \$_____ each month. I desire my Membership to become effective for Dues paying purposes _____(Date).

_____ **Yes**, the club has my permission to fax or e-mail me at the number or address above information about programs and services available to me as a club member.

_____ **No**, pursuant to the FCC rules, I do not give the club permission to e-mail or fax me information about club events or offerings that may be considered "commercial" under the new regulations.

I understand that all applications for membership will be considered and accepted in accordance with the Club Bylaws, a copy of which I have received and reviewed. I agree to be bound by all of the terms and conditions set forth therein. I understand that this membership, including all persons using the Club as a result of my membership are bound by and shall comply with all the Bylaws, Rules & Regulations of the Club, as they may be amended from time to time.

Memberships are being offered exclusively for the purpose of permitting persons acquiring a membership to obtain recreational use of the Club facilities. Membership should not be viewed or acquired as an investment and no person purchasing a Membership should expect to derive any economic profits from the Membership.

MEMBERSHIP SUBSCRIPTION AGREEMENT

The undersigned ("Applicant") hereby applies for Membership in The Meadows Country Club, Inc. ("Club") subject to the following terms and conditions:

1. This application will not be considered unless completed, signed and accompanied by a check in the amount required for the type of Membership desired.
2. Membership is contingent upon approval by the Club. All applications for Membership must be approved by the Membership Committee and all applicants are subject to interview prior to approval of their application for Membership. Such approval shall be at the Club's sole and absolute discretion. At the sole discretion of the Board of Governors, any non-annual membership may be cancelled without prior notice. Upon cancellation of the non-annual membership, dues or fees will be prorated based on the effective date of cancellation.
3. Receipt of copies of the Club's Bylaws, Articles of Incorporation, Rules & Regulations and Schedule of Dues & Fees is acknowledged and Applicant agrees to be bound by their respective terms and conditions if accepted for Membership. In addition, Applicant is responsible for any applicable Florida State Tax.
4. Applicant may request the Club to issue a temporary card, which will permit the Applicant to use the Club facilities pertinent to the type of Membership applied for, while the application is being processed. The issuance of such a card is a courtesy to the Applicant and IS NOT TO BE CONSTRUED AS AN INDICATION OF ACCEPTANCE. In the event the application is subsequently approved by the Club, Applicant's dues, fees and other charges will commence as of the date the temporary card was issued.
5. The deposit by the Club of the Applicant's check IS NOT TO BE CONSTRUED AS AN INDICATION OF ACCEPTANCE. In the event the application is not approved by the Club, Applicant will receive a full refund less any charges incurred while using a temporary card. Upon approval for membership by the Board of Governors all dues are non-refundable.
6. Applicant will be notified by the Club as to whether or not Applicant has been accepted for Membership.
7. Application authorizes the disclosure and release of information to the Club for the purposes of reviewing Applicants' qualifications for Membership and authorizes those persons named in the application to furnish information regarding the Applicant to the Club.
8. Applicant acknowledges and agrees that any dues paid to the Club for his/her membership are not refundable or prorable.

Signed _____, Applicant
Date _____, 20_____ U.S. Citizen Yes No

Signed _____, Applicant's Spouse/Significant Other
Date _____, 20_____ U.S. Citizen Yes No

THE MEADOWS COUNTRY CLUB

MEMBERSHIP DIRECTOR _____

MEMBERSHIP COMMITTEE APPROVAL _____ DATE _____

BOARD APPROVAL _____ DATE _____

CATEGORY _____ FAMILY SINGLE MEMBER NO. _____