

PEDDIE SCHOOL GOLF COURSE

APPLICATION FOR ANNUAL GREEN PRIVILEGES

Date _____

Application for Membership Type _____ Single _____ Family

Primary Member Name _____

Home Address _____ Phone _____

City & State _____ Zip _____

Business or Profession _____

Name of Company or Employer _____

Present Position _____

Business Address _____ Phone _____

Length of time with present employer _____

Address bills to _____

For Family Memberships – Please List

Secondary Member Name _____ Relationship _____

Check Status of Each

Children's Name	Date of Birth	Working	Going to School	Living Home	Not Working
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Remarks

I, the above named applicant, promise in the event of being elected to membership, to conform to and abide by the rules and regulations of the Peddie School Golf Course.

Applicant's Signature _____

Sponsored by _____

The Peddie School does not discriminate with regard to sex, race, color, religion, disability or age.