



Support **YOUR Club!**



BRATTLEBORO COUNTRY CLUB, INC.
2017 Season Membership Application / INVOICE

Member Information:

Name: _____
 Address: _____ City _____ State _____ Zip _____
 Phone Number: _____ Cell _____
 Email Address: _____ Corporate Tax ID #: _____

Tax ID required for Corporate Membership

Section 1: Circle Membership Dues Type / Amount / ADD DOB if applicable:

<u>Single Adult:</u>	\$1,675
<u>Family:</u> includes Juniors	\$2,695

	Age as of 04/30/2017		Date of Birth
Single Adult	75-79	\$1,585	
Senior:	80+	\$1,495	
	90+ and past member	Donations Only Accepted	

Family Senior:	75-79	\$2,550	
	80+	\$2,400	

<u>Corporate</u>	\$2,595.00
Receive (80) eighty (9) nine hole green fees	

	Age as of 04/30/2017		Date of Birth
Single	12-18	\$235	
	19-22	\$340	
	23-29	\$820	
	30-34	\$1,020	

All Dues include 6% Vermont Sales Tax

Handicap Fee: \$20.00 PER Golfer

Section 2: Circle Choice / Amount:

2017 Cart and Range Passes		
CARTS	Single (per seat)	\$636.00
	Family	\$1,060.00
RANGE	Single	\$174.90
	Family	\$238.50
Golf Bag Storage / Cleaning	Each Per Season	\$132.50

Additional Membership Option

Short Game
Unlimited Range and Practice Greens Use Each Per Season **\$ 450.00**
Includes 10% Off Daily Greens Fees

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PAYMENT SUMMARY

SECTION 1: DUES

-Paying IN FULL: Check or Credit Card

Total Dues: _____

Handicap Fee @ \$20.00 PER Golfer: _____

Total DUES by: _____ (add above)

Handicap Fee @ \$20.00 PER Golfer: _____

Total DUES to Credit Card on: _____ (add above)

SECTION 2: Carts / Range / Golf Bag Storage & Cleaning / Short Game Option

-Paying IN FULL: Check or Credit Card

Total Carts: _____

Total Range: _____

Total Golf Bag Storage / Cleaning: _____

Total Short Game: _____

Total SECTION 2: _____ (add above)

YOUR PAYMENT TOTAL (Add Sections 1 & 2 above): _____

PAYMENT METHODS

-SUPPORT YOUR CLUB PAY BY CHECK payable to: Brattleboro Country Club

or

-CREDIT CARD: NOTE: Credit card payments must fill out ALL the information below.

Cardholder Name: _____ Card Type: M/C / VISA / DISCOVER / AX (circle one)

Card Number: _____ Expiration Date: _____ (month/year)

SIC CODE: 3-Digit Code on back of M/C, VISA & Discover: _____

SIC CODE: 4-Digit Code on front of AX: _____

Cardholder Signature: _____ Date: _____

The cardholder authorizes the Brattleboro Country Club to make the appropriate charges to the above account.

Please return this completed invoice with your payment.

MAIL TO: Brattleboro Country Club, P.O. Box 478, Brattleboro, VT 05301

Questions: You can reach Melanie at 802-257-7380; or email to mboese@brattleborocc.com

Thank you for your continued support! Melanie