



## 2020 POOL MEMBERSHIP APPLICATION

Greene County Country Club

P.O. Box 156

Jefferson, PA 15344

724-883-4880

724-883-4977

www.greenecountycc.com

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Type of Membership:** (Please select one from the following.)

\_\_\_\_\_ Individual (**\$75**)

\_\_\_\_\_ Family (up to 5) (**\$125**)

\*Family Information: Please provide names and birth dates of family members that will be included in the Family Pool Membership

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ |          |

I hereby apply for membership for Greene County Country Club, and agree to pay the required dues and fees in the amounts fixed by the By-Laws for the membership for which application is being made, and which are in effect during the time I remain a member. All dues set are subject to change by the Board of Governors.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Sponsored By:** \_\_\_\_\_ **Approval Date:** \_\_\_\_\_