2010 LE SUEUR COUNTRY CLUB
AGE 24-29 MEMBERSHIP PROMOTION

MEMBERSHIP CATEGORY ____
(SINGLE OR FAMILY)

AMOUNT PAID ____
(SINGLE - $726.43 or FAMILY $833.31)

NAME: _____________________________________ D.O.B. _____________

SPOUSE: ___________________________________ D.O.B. _____________

ADDRESS: ____

CITY: ______________________________ STATE: _________ ZIP: ___________

PHONE: ________________________ WORK PHONE: __________________________

OCCUPATION: ____

SPOUSE'S OCCUPATION: ____

E-MAIL ADDRESS: ____

SOCIAL SECURITY NUMBER: ____

SPOUSE'S SOCIAL SECURITY NUMBER: _________________________________

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(PLEASE READ AND SIGN)

I HEREBY AGREE TO ABIDE BY THE REGULATIONS AS SET FORTH IN THE BYLAWS AND GENERAL RULES AS AUTHORIZED BY THE BOARD OF DIRECTORS OF LE SUEUR COUNTRY CLUB. I HEREBY SUBSCRIBE FOR ONE SHARE OF CAPITAL STOCK IN THE LE SUEUR COUNTRY CLUB AND GIVE MY PERMISSION TO SUBMIT A CREDIT CHECK. I UNDERSTAND THAT IF MY BILL BECOMES PAST DUE, I COULD BE SUBJECT TO MY MEMBERSHIP BEING SUSPENDED OR TERMINATED.
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MEMBER'S SIGNATURE: ____

DATE: ________________________