



It's a new day at The Dalles County Club.

Come tee it up with us!

CORPORATION MEMBERSHIP APPLICATION THE DALLES COUNTRY CLUB

Name of Corporation/Company: _____

Name of Principal Associate: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____ Alternate Phone: _____

Email Address: _____

Names of Associate Members:

Principal Associate: _____

Associate: _____

Associate: _____

Associate: _____

Associate: _____

Upon signing this application, the undersigned agrees to abide by the by-laws and rules of the Club as they now exist, or as they may be modified or amended hereafter. The Corporation/Company and the Principal Associate are responsible for the conduct of all Associates and their guest while using all Club facilities.

Corporation/Company Membership includes all golf and social functions, full use of all services and amenities for themselves and immediate members of their household and their guests. Corporate/Company memberships are entitled to one (1) vote in Club matters. The Principal Associate will be the voting member. Corporate/Company membership is subject to a food assessment and monthly irrigation fee per Associate. Cart rental, cart or bag storage, or any locker rental is not included but are available for additional fees.

Acceptance of this application will be based upon a thorough review by the Membership committee and a vote approval of the Board of Directors. Further, the applicant also agrees that the Corporation/Company and its Principal Associate accepts responsibility for any and all Club dues, membership fees, initiation fee, assessments or other indebtedness of Associates, their families and any guests they sponsor. The amount of dues are subject to change per the needs of TDCC and an action by the Board of Directors.

Initiation Fee: _____ Amount Enclosed: _____

Preferred Billing Method: Monthly: _____ (ACH or Credit Card Only)

Quarterly: _____ Semi-Annual: _____ Annual: _____

Signature: _____ Title: _____ Date: _____

FOR INTERNAL USE:

Membership Approved: _____ Date: _____

Sponsored by: _____