

# Choctaw Country Club, Inc.

P.O. Box 827, Poteau, OK 74953-0827 (918) 647-3488

I, \_\_\_\_\_ hereby apply to the **Choctaw Country Club, Inc.** of Poteau, Oklahoma, for a  
 Regular  Young Adult\*  Student\*\*  Social\*\*\* membership (please check appropriate membership type).

If accepted for membership, I agree to conform to the Bylaws and all rules and regulations of the club that are in effect at this time, or that may become effective at some later date. I also understand that if I am accepted as a member in the club, and at some later date wish to resign my membership, I must do so by giving a written letter of resignation to the club manager or club accountant (Brian Roberts, CPA,) or by mailing the letter of resignation to the President of the club at the above address, prior to the effective resignation date. I also understand that any monthly dues, assessments, and clubhouse charges due by me will be paid in-full at the time of resignation or legal action to recover these charges will be filed by the club.

\* **Young Adult** memberships are for persons 18 to 32 years of age. Reverts to a regular membership upon the 33<sup>rd</sup> birthday.

\*\* Applicants for **Student** memberships for persons under the age of 18 years, must be made and signed by a parent or legal guardian of the applicant. The parent or legal guardian assumes legal financial responsibility until the applicant turns 18. Student memberships are for full-time students under the age of 23.

\*\*\* **Social** memberships allow for use of Clubhouse and Pool only.

**Please Type or Print**

Name (as it should appear for Billing): \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Profession or Business \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Bank Reference \_\_\_\_\_ Phone \_\_\_\_\_

Number of persons in family \_\_\_\_\_ (Not to include dependants 23 years old or older)

**Student under 18 or**

<u>Spouse / Child / Dependant Name</u>	<u>Relationship</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person(s) eligible to sign charge tickets: \_\_\_\_\_

**Current Membership Rates**

<b>Regular Membership Dues (Monthly)</b>	<b>\$81.92</b>
<b>Young Adult Membership Dues (Monthly)</b>	<b>\$68.70</b>
<b>Social Membership (Annual)</b>	<b>\$300.00</b>
<b>Student Membership (Annual)</b>	<b>\$300.00</b>

**INITIAL FEE INFORMATION**

\$ \_\_\_\_\_ Initiation/Application Fee (\$125)

\$ \_\_\_\_\_ First Month or Annual Dues

\$ \_\_\_\_\_ Total

**BILLING PREFERENCES**

Bill monthly dues and charges to me at the above mailing address.

If possible, draw monthly dues and charges on my bank account (information below).

Bank \_\_\_\_\_

Account Number \_\_\_\_\_

By signing this application, I agree to pay all dues, assessments and charges that I may incur while a member of the club.

**Applicant (or Parent/Legal Guardian of Student)**

**Signature** \_\_\_\_\_

**Date of Application** \_\_\_\_\_

**RECOMMENDATION**

I am being recommended for membership by the following current members of Choctaw Country Club:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_