



P.O. Box 2886  
Kokomo, IN 46904  
(765)457-3278  
www.kokomocountryclub.com

## APPLICATION FOR MEMBERSHIP

### Applicant

### Spouse

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

Home or Cell Phone: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

\_\_\_\_\_

Position: \_\_\_\_\_

\_\_\_\_\_

Work Phone: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

\_\_\_\_\_

SSN: \_\_\_\_\_

\_\_\_\_\_

Children Under 21 (and Date of Birth) : \_\_\_\_\_

## Membership Category

- Family Regular
- Family Golf Associate
- Single Golf Associate
- Corporate
- Corporate Additional
- Junior Golf Associate
- Social Associate
- Pool Associate

Work or other address if statement is *not* to be sent to home address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Office Use Only**

Member # \_\_\_\_\_

Member Locker # \_\_\_\_\_ Combination \_\_\_\_\_

Member Locker # \_\_\_\_\_ Combination \_\_\_\_\_

KCC Website Username \_\_\_\_\_

Password \_\_\_\_\_

Shag Range (1 or 2) \_\_\_\_\_ Hole in One Club (#) \_\_\_\_\_

Sponsors:

Print

Signature

Prime: \_\_\_\_\_

\_\_\_\_\_

Seconded: \_\_\_\_\_

\_\_\_\_\_

I agree to abide by the Bylaws, Rules, and Regulations of the Kokomo Country Club. I understand that I am responsible for all initiation fees and/or promissory notes. I further agree to pay all costs of collections, including reasonable attorney fees, in the event that my account becomes delinquent and my account is referred to any attorney or other collection agency. I have attached a biographical sketch on the back of this page.

Signed and agreed to:

\_\_\_\_\_ Member

\_\_\_\_\_ Email Address

Date \_\_\_\_\_

\_\_\_\_\_ Spouse

\_\_\_\_\_ Email Address

