

Towanda Country Club
 645 Golden Mild RD
 Towanda, PA 18848
 570-265-6222
tccsec@epix.net

2017 APPLICATION FOR TCC SOCIAL MEMBERSHIP

INTERNAL USE ONLY	
Cash or Check # _____	
Date _____	Initial _____
Member Number _____	
Yearly Dues Amount _____	

MEMBER INFORMATION	FIRST NAME	LAST NAME	DATE OF BIRTH
PRIMARY MEMBER			

ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE	ZIP CODE

PRIMARY EMAIL ADDRESS	SECONDARY EMAIL ADDRESS

PRIMARY PHONE NUMBER	SECONDARY PHONE NUMBER

MEMBERSHIP TYPE

SOCIAL/HOUSE (Clubhouse Only) - No boundary, minimum age 21. Includes use of bar and dining room and any social event. Full dues are \$50.00, includes 1 free round of golf. Payment must be made in full. This is an individual membership; a spouse may accompany a member.

This is an application for Social membership only, the Towanda Country Club rules and by-laws will govern in all circumstances. Completion of this application does not guarantee your acceptance as a Social member of the Towanda Country Club. Upon completion of this signed application and payment in full, applicant is entitled to the use of the Club as described above. The Board of Directors meets *monthly*, your membership application will be considered for approval at the next meeting. A sponsor or reference is required when submitting an application. A sponsor is a current TCC member in good standing; a reference is not a TCC member but is someone that can speak to the character of the applicant.

SPONSOR NAME _____ SPONSOR PHONE NUMBER _____
OR
 REFERENCE NAME _____ REFERENCE PHONE NUMBER _____

PRIMARY MEMBER APPLICANT SIGNATURE _____ DATE _____