KIRKSVILLE COUNTRY CLUB 1115 COUNTRY CLUB DR. KIRKSVILLE, MO. 63501 (660) 665-5335

APPLICATION FOR MEMBERSHIP AND AGREEMENT

I, _______hereby apply for a membership in the Kirksville Country Club, Inc. and agree to purchase a membership initiation fee receipt (if applicable) in one of the following ways: (check one)(descriptions of membership categories are on the back of this page).

Chec	k Desired Membership Classification	Initiation Fee	Equity Fee	Annual Dues	If Paid Monthly	Vote
()	Family (Regular) Membership	\$210	\$150	\$1990	\$165.85	Yes
()	Unmarried Membership	\$210	\$150	\$1640	\$136.70	Yes
()	Junior Membership (Family)	\$210	\$150	\$1195	\$95.60	No
()	Student Membership (Individual)	\$0	\$0	\$990	\$82.50	No
()	Out of Area Membership	\$0	\$150	\$1295	\$107.95	Yes
()	Social and Pool Membership	\$0	\$150	\$895	\$74.60	Yes
()	K-12 Student Membership	\$0	\$0	\$315	\$26.25	No

Effective 2002, the club is requiring the payment of an equity fee for all plans with the exception of Student and K-12 memberships. The fee is 100% refundable when you leave the club, as long as club obligations are paid.

Special payment plans are allowed please read the back for details.

It is understood and agreed that the initiation fee and a dues payment shall entitle me to the assigned membership privilege of the Kirksville Country Club, Inc. providing that I comply with the rules and regulations established by the Club. Also, I understand that the dues are due and payable on January 1 of each year and my membership dues for this year expire on December 31. It is further understood and agreed that upon presenting a request to withdraw said membership or upon the request for withdrawal from membership by the Board of Directors for noncompliance with established rules and regulations I will be bound by club policy. I will abide by the procedure for the initiation fee receipt and debts due to the Club. Please return this application and a check for fees owed to Kirksville Country Club at the above address.

Should your account become delinquent either an automatic deduction will be debited to your bank account or charged to your credit card of record.

Applicant signature and Date		Club Interest other than golf					
Spouse's name		Email address					
Date of Birth (if applying as junio	or member)	Mailing Address					
Phone number	Sponsoring Mer	Sponsoring Members (requires 2 signatures)					
Credit Card Number	Exp. Date	Checking Acct #	Bank Name				