## WELCOME TO DIXIE GOLF ASSOCIATION

Thank you for choosing Dixie Golf as your golf club! We appreciate your patronage.

- ~ Regular membership monthly dues \$145.00 (Ages 30 and up)
- ~ Associate membership monthly dues \$90.00 (Up to age 30)
- ~ First month's dues must be paid at the time of application
- ~ Membership includes green fee and access to charging privileges in the Pro Shop.
  - » All charges are billed on the 25<sup>th</sup> of each month and must be paid in full within 30 days.
  - » Any charges unpaid after 60 days will result in suspension of your account.
  - » Any charges unpaid after 90 days will be subject to the small claims court.
- ~ All memberships in good standing have voting rights for our annual board of directors and are eligible to run for elected positions.
- ~ 1<sup>st</sup> Assessment \$175.00 (current year, but does vary from year to year) lease fee annually to be paid within 3 months.
  - » Prorated based on joining month in first year of membership.
  - » Billed at full price every year thereafter.
- $\sim 2^{nd}$  Assessment \$100.00 to be paid by August 1st of each year.
- ~ Membership applicants under age 18 must have parental consent.
- ~ Cart stall rental available for \$18.00 per month.
- ~ Men's and Ladies' locker rental available for \$5.00 per month.
- ~ Termination of membership must be done in writing or by email.

Please feel free to contact the office with questions or concerns at 601-649-4254.

## APPLICATION FOR MEMBERSHIP **Dixie Golf Club**

750 Hillcrest Drive

Laurel, Mississippi 39440
Telephone: (601) 649-4254 Pro Shop Telephone: (601) 649-3384
Email: admin@dixiegolf.net

Membership Type:	( ) Associate	( )	( ) Regular		
PRIMARY APPLICANT II Name: (PLEASE PRINT) Mr. Mrs. Ms.:		(MIDDLE)	(LAS		
(1110	<i>,</i>	(MIDDLL)	(MIDDLE) (LASI)		
Home Address: (STREET)		(CITY)	(STATE)	(ZIP)	
fome Phone Number: ()		Alternate Pl	Alternate Phone Number: ( ) -		
Date of Birth: En		Email Address:	Email Address:		
BUSINESS INFORMATIO	N:(NAME OF BUS	SINESS)	(TITLE)		
Business Address: (STREET)	)	(CITY)	(STATE)	(ZIP)	
Business Phone Number: (	) -				
SPOUSE INFORMATION: Name: (PLEASE PRINT) Mr. Mrs.:					
(FIRS		(MIDDLE)	(LAST)		
Date of Birth:		_			
<b>DEPENDENT INFORMAT</b> order to be eligible to play un			a dependent on your tax r	eturn in	
Name:		Dat	Date of Birth:		
1.)	_				
2.)					
4.)					
BILLING PREFERENCE:					
Do you prefer to receive your	monthly billing st	tatement by mail or email?			
If by mail, home address or b					
Other preferred mailing addre	ess:				

To the Board of Directors of Dixie Golf Club:

I hereby make an application for membership in Dixie Golf Club. Attached hereto is the sum of \$\_\_\_\_\_ for the required amount of first month's dues.

I understand that in every membership category a primary member is required to be designated. This individual

I understand that in every membership category a primary member is required to be designated. This individual has sole authority to determine who will be authorized for use of their membership, (spouse or children) contingent upon the rules and regulations as set by the Board of Directors. This person is also responsible for the payment of all charges placed on the membership account by authorized users. For the purposes of this policy, unless otherwise directed by the primary member in writing to Dixie Golf Club, spouses and children (denoted on this application for membership) are automatically authorized use of Dixie Golf Club facilities, which allows them charging privileges on the account. I also understand that I will be joining Dixie Golf Club for a minimum term of 12 months.

If elected to membership, I, as the primary member on my account, agree:

- 1) To abide by the by-laws, rules, and regulations of Dixie Golf Club, as set by the Board of Directors
- 2) To pay all monthly charges on my account upon receipt of monthly statement.
- 3) Dixie Golf Club may access a late charge for past due accounts as provided in the by-laws as amended from time to time.
- 4) To pay all reasonable attorney fees, investigator fees, and cost in the event this account is turned over for collection. Unpaid invoices are subject to be taken to small claims court.
- 5) That in the event I should resign from membership in Dixie Golf Club, same shall be in writing and all dues, etc. in arrears must be paid by me before such resignation will be accepted.

"Primary" Appl	icant Signature:		Date:
If under age 18, a	parent or guardian must ag	gree to the above statements and sign	as the responsible party below:
Responsible Par	ty Signature:		Date:
Name: (PLEASE I	PRINT)	N: (For applicants under age 18)	
IVII. IVIIS. IVIS	(FIRST)	(MIDDLE)	(LAST)
	Primary Applicant address		
Home Phone Nun	nber: ( ) -	Email Address:	: