

## Membership Application

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell # \_\_\_\_\_

Voting Address \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address \_\_\_\_\_ Sponsoring Member \_\_\_\_\_

Occupation \_\_\_\_\_

Employee \_\_\_\_\_ Business Address \_\_\_\_\_

Other Club Affiliations

Golf Club \_\_\_\_\_ Hdep \_\_\_\_\_

If no Hdep, Golf Experience \_\_\_\_\_

Other Social or Athletic Clubs \_\_\_\_\_

Type of Membership Desired

Single  Single U/35  Senior  Junior (18 & over)  Junior (16 & 17)

Junior (15 & under)  Social  Clergy

I have read the Woodstock Golf Club, Inc Rules and Regulations and accept the rules regulations, terms and conditions of membership contained therein.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please provide a copy of your drivers license with this application

**WOODSTOCK GOLF CLUB, INC.**  
P O B O X 303 WOODSTOCK, NY 12498  
P H O N E 845-679-2914

## Membership Information & Application

Woodstock  
Golf  
Club



2009