Frisch Auf! Valley Country Club Annual Membership Application

Membership Type:	
Please circle the amenities of interest:	Club House Bar Banquet Rooms Fitness Golf Tennis Pool
Applicant:	2nd Signer:
Date of Birth://	Date of Birth:/
Anniversary Date://	
Mailing Address:	Zip Code:
	Zip Code:
	Second Email:
Home #:	
Cell #:	
	Occupation:
List Dependents (family membership) o	r additional employees (if corporate membership)
Name DOB	Name DOB
How did you hear about us:	
Have you ever been convicted of a fe (If yes, attach a separate sheet giving d	
considered by said Board unless membership payme This application shall be valid for individuals only and accidents to members, a spouse, dependents or his / spouse of member, guest or by member dependents the terms of the by-laws of the Club and any amendr discretion. This application is a binding agreement of	Board of Directors of Frisch Auf! Valley Country Club, Inc., and no application will be nt and dues for two (2) months are attached to this application. I applicant hereby agrees to hold Frisch Auf! Valley Country Club, Inc., harmless for any her guests. Applicant accepts responsibility for all Club obligations incurred by member, a listed herein for any damage to or theft of Club property. This applicant agrees to comply with ments promulgated from time to time be adopted by the Board of Directors in their sole for a term of 12 months from acceptance, after which the agreement will continue month to membership in the Club by giving written notice of the intention to resign, but such member at the time of such resignation.
One Bank Reference:	Phone #:
One Credit Reference:	Phone #:
	Member #:
	Member #:
Applicant Signature:	Date: