

MILES GRANT COUNTRY CLUB  
2024 SUMMER GOLF MEMBERSHIP

April 27, 2024 – October 6, 2024

Date: \_\_\_\_\_

Member Number: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

Please attach copy of Driver License

**Details of Summer Golf**

- \* **\$227.25** (\$125 fee + \$8.12tax + \$94.13 F&B min)
- \* \$ 94.13 (\$75 + \$19.13 Tax & Gratuity) F&B Minimum Prepaid will be applied as a credit to account
- \* Summer golf members may dine in Tavern when open and in dining room on Friday evenings and Sunday Brunch
- \* Includes one free round of golf (Includes Cart)
- \* Rates Before 1pm 18 holes \$28 | 9 holes \$18
- \* Rates After 1pm 18 holes \$22 | 9 holes \$18
- \* Spouses are considered guests: \_\_\_\_\_ initial

I agree to abide by the Rules & Regulations of Miles Grant Country Club and pay all dues & fees in accordance with the fee structure set forth by Miles Grant throughout the life of this membership.

Applicant Signature \_\_\_\_\_

**Method of Payment**

Check: \_\_\_\_\_ Credit Card: \_\_\_\_\_

**Credit Card - 3.4% Interest + \$.20 Applied When Paying With Credit Card**

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_