



Country Club

Application for Membership

4300 South Shore Boulevard, League City, TX 77573
(281) 334-0521 www.SSHGolf.com

I hereby apply for Membership, and the resultant rights and privileges therein.

CANDIDATE INFORMATION

Mr. Mrs. Ms. Miss Dr.

Name (Please Print) _____
(Undersigned)

Date of Birth _____ / _____ / _____

Home Address _____

City _____ State _____ Zip _____ Home Phone () _____

Marital Status Single Married Other E-mail _____

Anniversary Date _____ *Valid driver's license to be

Driver's License Number _____ State _____ submitted at time of application

Company Name _____ Type of Business _____

Position _____ Length of Employment _____ (Years)

Business Address _____

City _____ State _____ Zip _____

Preferred Phone () _____ E-mail _____

MAILING INFORMATION: Statements Home Business Newsletter & Other Home Business

SPOUSE INFORMATION

Mr. Mrs. Ms Miss Dr.

Spouse's Name (Please Print) _____ Date of Birth _____ / _____ / _____
(Co-applicant)

Preferred Phone number _____ E-mail _____

Spouse's Driver's License _____ State _____

Spouse's Company Name _____ Type of Business _____

Position _____ Length of Employment _____ (Years)

Business Address _____

City _____ State _____ Zip _____

Business Phone () _____

I would like my name, address, home and business telephone numbers to appear in the membership directory. (If this statement is not answered, information will not be placed in directory), Yes No

DEPENDENT INFORMATION (unmarried children under 21 (age 23 if attending college full-time) who live at home)

Date of Birth
Sex

Charge
Privileges

Name

_____ / _____ / _____ Yes No

_____ / _____ / _____ Yes No

_____ / _____ / _____ Yes No

MEMBERSHIP INFORMATION

I am applying for Membership in the following category (refer to enclosed Schedule of Membership Classifications and Fees:

- Full Privilege Golf Classic Golf Membership Associate Golf Membership
- Social Membership

INITIATION FEES AND DUES

Initiation Fee: \$_____ (non-refundable)

Monthly Dues: \$_____

(Dues are subject to change at the sole discretion of the Club.)

REFERENCES & OTHER CLUB AFFILIATIONS

PERSONAL REFERENCES

My Member sponsor is: _____

Other personal references (can be non-Members, Employer, Business Acquaintance, Neighbor, Etc.): Business Phone

1. _____

2. _____

OTHER CLUB AFFILITATIONS

Club Name	City	Length of Membership
1, _____	_____	_____ years
2, _____	_____	_____ years

CORPORATE MEMBERSHIPS (IF APPLICABLE)

Corporate Memberships are held by the corporation or firm. A designee is named by the Corporate Membership holder as the person entitled to use the Membership ("Undersigned"). There shall be only one designee for each Membership, but the designee may be changed from time to time subject to the approval of Club Management and/or the Admissions Committee and payment of the appropriate transfer fee (as of the date of change). The Membership card will be issued in the name of the approved designee.

As a duly authorized officer of the company named, the undersigned officer certifies and agrees said company is co-responsible with the individual designee for all dues and charges incurred by its designee.

(Full Name of Company)

(Officer's Signature)

(Title)

If application is for a corporate change of designee, please fill in the following:

Previous designee _____ Membership No. _____

RESIGNATION

It is agreed that a Member may resign from the Club by giving written notice to the Club Management on or before the end of the month. All accrued dues and other charges for which Member is liable are due upon the effective date of resignation, that date being the last day of the month following the month in which written notice is received.

Membership Dues are not prorated. Membership does not confer any ownership of the Club property or assets. It is further agreed that a Member may not offset dues and charges against the initiation fee.

PAYMENT OF ACCOUNT

Payment of account is due on receipt of the monthly statement which will be sent electronically to the Member’s email. Undersigned agrees to pay the account in full via automatic bank draft. Should the bank draft be rejected Membership privileges will be suspended until cured. If not cured in 30 days, Membership will be terminated. Undersigned agrees Club will assess a late charge for past due accounts as provided in the By-laws of the Club as amended from time to time. In addition to late fees, penalties may include, but are not limited to, suspension of Club privileges and/or expulsion from membership. A membership terminated for nonpayment may be reinstated, if at all, at the sole discretion of the Club and upon such terms as the Club may determine. Undersigned agrees to pay all reasonable attorney fees, investigator fees and costs in the event this account is turned over for collection

HAVE YOU EVER BEEN CONVICTED OF A SEXUAL OFFENSE OR REQUIRED TO REGISTER AS A SEX OFFENDER? By submitting this application, I certify that I have never been convicted of a sexual offense or Required to register as a sex offender. I also certify that none of the authorized users under my membership (as defined by the Club’s Membership Bylaws or Rules and Regulations) have been convicted of a sexual offense or required to register as a sex offender

MEMBERSHIP POLICIES

If accepted into membership at the Club, this Candidate Application, any addendum, the Membership Bylaws and the Rules and Regulations, as each may be amended from time to time (collectively, the “Membership Documents”), will be my entire contract with the Club. The terms and conditions of my contract may not be added to, amended or contradicted in any way by evidence of prior, contemporaneous or subsequent oral agreements of any kind, and I am not relying on any representations or promises made, at any time, other than as expressly set forth herein. If accepted into membership, I agree to conform to and be bound by the Membership Documents, which set forth the Club’s policies, including, but not limited to, provisions addressing the resolution of disputes (including arbitration and a class action waiver), resignation, disciplinary action and a release of liability for personal injury and theft.

I hereby acknowledge receipt of a copy of the Membership Bylaws and the Rules and Regulations, which are available from the Club and, if accepted into membership, on the members-only section of the Club’s website. It is my duty to obtain and read the Membership Bylaws and Rules and Regulations and to notify the Club within 3 business days of enrollment if I wish to rescind this contract.

Acknowledgement of Bylaws and Rules & Regulations: P: _____ S: _____

I ASSUME ALL RISKS associated with accessing the Club facilities and the facilities of any participating network clubs, including, but not limited to, dining and event rooms, recreational amenities and outdoor areas, grounds, parking areas, equipment, golf balls or clubs, and golf carts. I ALSO HEREBY FULLY RELEASE AND DISCHARGE THE CLUB, ITS PARENT, AFFILIATED AND SUCCESSOR COMPANIES, AND ALL OF THEIR RESPECTIVE EMPLOYEES, AGENTS, SHAREHOLDERS, MEMBERS, MANAGERS, AFFILIATES AND ASSIGNS (THE “RELEASED PARTIES”) FROM ANY AND ALL LIABILITIES, INJURIES, LOSSES, DAMAGES OR CLAIMS ARISING FROM MY OR MY FAMILY’S USE OF THE CLUB FACILITIES, INCLUDING ANY SUCH CLAIMS CAUSED BY THE RELEASED PARTY’S OWN NEGLIGENCE. The Club may redeem my membership, which is a revocable license to access certain facilities, at any time for any reason or for no reason by repaying me the Initiation Fee (without interest or premium of any kind), if any, that I originally paid to the Club. Upon such redemption, all my rights to use the Club will immediately cease, and I shall automatically RELEASE AND DISCHARGE THE RELEASED PARTIES FROM ANY AND ALL LIABILITIES, INJURIES, LOSSES, DAMAGES OR CLAIMS ASSOCIATED WITH MY MEMBERSHIP AND THE REDEMPTION THEREOF.

By providing my contact information above, I agree to the Club’s Privacy Policy, a copy of which is available on the Club’s website and give the Club permission to contact me in accordance with such Privacy Policy. I can modify my communication preferences by contacting the Club in writing per the terms of the Privacy Policy.

Events I attend at the Club may be photographed or recorded for marketing or promotional purposes, and I give the Club a nonexclusive license to use my photograph and likeness in any/all media to promote the Club without any compensation to me.

If this membership includes a spouse, I certify that we hold a marriage license or its equivalent and that we are each jointly and severally liable for all charges incurred under this membership. I further certify that I have the authority to and do hereby sign and agree to these Membership Policies on behalf of any dependent users on this membership.

By submitting this Candidate Application, I represent and affirm that the information provided herein is true and correct. If signing electronically, I agree that my electronic signature has the full force and effect of a signature affixed by hand to a paper document.

Signature of Primary Candidate:

Date

Signature of Spouse:

Date

Accepted for Membership:

On this _____ day of _____ 20_____

By: _____

(Signature of Club Officer)



Country Club 4300 South Shore Boulevard, League City, Texas 77573 (281) 334-0521

AUTOMATIC BANK DRAFT FORM

We require automatic bank draft whereby your payments will be electronically transferred directly to us each month.

Your Security:

We know that you are concerned about your security; so are we. SSHCC uses highly reliable Secure Socket Layer (SSL) technology to encrypt and secure your confidential information.

Return completed form below along with a voided check for the account you wish SSHCC to draft, please verify your ABA routing number and account number with your banking institution. (No deposit slips, please) The Automatic Bank Draft is scheduled for the 10th of every month, for your statement dated the last day of the previous month.

Bank Name: _____

ABA/ routing number: _____

Account Number: _____

This is a: Savings account Checking account (please check one)

AUTOMATIC BANK DRAFT

By entering my signature and submitting this enrollment form, I hereby give SSHCC all authority to debit my bank account for the purpose of paying all amounts due, when due, for the SSHCC Membership accounts identified below.

*Please note that not all Credit Unions or Savings and Loans provide for drafting of checking accounts, contact yours to see if his service is available,

Account Holder: _____

(Joint Account Holder if applicable) _____

SSHCC Membership # _____ Phone Number: _____

RETURN THIS FORM TO:

South Shore Harbour Country Club, 4300 South Shore Blvd., League City, Texas 77573



Membership Additions

Monthly:

- | | |
|--|-----------|
| <input type="checkbox"/> Unlimited Cart Plan | \$ 125.00 |
| <input type="checkbox"/> Private Cart Trail Fee
(requires Private Cart Agreement) | \$100.00 |
| <input type="checkbox"/> Men's Locker | \$ 10.00 |
| <input type="checkbox"/> Women's Locker | \$10.00 |

Annually:

- | | |
|---|------------------|
| <input type="checkbox"/> Ladies Golf Association
(billed and collected by LGA) | \$60.00 (no tax) |
| <input type="checkbox"/> Men's Golf Association | \$60.00 (no tax) |
| <input type="checkbox"/> Handicap (Primary mbr) | \$30.00 |
| <input type="checkbox"/> Handicap (Spouse) | \$30.00 |
| <input type="checkbox"/> Handicap (Dependents) | \$30.00 |

Per Occurrence:

- | | |
|---|-----------------|
| <input type="checkbox"/> Hole in One Club | \$5.00 (no tax) |
|---|-----------------|

I/We the undersigned would like to enroll in the above noted Club Services or Associations.

Signature of Primary Candidate:

Date

Signature of Spouse:

Date