



**PO Box 72 DOVER RD.,
BARNEVELD, NY 13304
glasshillgolf.com**

2018 Application for Membership

Application for Membership/Renewal • All Fields must be completed

Date: _____

Name (s) _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Email address must be completed for correspondences: _____

Couple memberships please list more than one email address.

PLEASE CHECK MEMBERSHIP THAT APPLIES:

_____ 2018 Single Membership **\$412.67**

_____ 2018 Couples Membership **\$562.95**

_____ 2018 Family Membership **\$596.46**

Any **current** member wishing to upgrade his/her membership status in the following fashion; Single to Couple, Single to Family, or Couple to Family **must** sign this document and provide (2) two other current members signatures as sponsors of this application.

Applicant _____

Sponsors _____

COUPLE & FAMILY MEMBERS MUST BE FROM SAME HOUSEHOLD AND/OR A DEPENDENT ON THE CORRESPONDING MEMBERS INCOME TAX RETURNS.

PLEASE LIST ALL MEMBERS ELIGIBLE TO PLAY UNDER MEMBERSHIP:

NAME & AGE (if child)

1. _____ 3. _____ 5. _____

2. _____ 4. _____ 6. _____



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A NEW applicant must provide (2) current members signatures as sponsors with this form.

Applicant _____

Sponsors _____

Trail Fee – fill in separate form (\$175.00)

Trail Fee Application

I hereby agree to proper use and procedure of carts on the course at Glass Hill. I acknowledge the undersigned person(s) will be the only users (drivers) of said cart. I have enclosed **\$175.00** for my trail fees in addition to my regular membership fees.

Please print names clearly on lines below:

1. _____

2. _____

Cart Number _____

Signed: _____

Date: _____

Please send completed document and payment in full to address below.

GLASS HILL GOLF CLUB, INC., PO BOX 72 DOVER RD., BARNEVELD, NY 13304

glasshillgolf.com