



MEMBERSHIP APPLICATION

1. Personal Information

Name _____ Spouse _____
 Address _____
 City _____ State _____ Zip _____
 County _____ Phone () _____
 Email _____
 Children: (Name & Age) _____
 Birthdate of Applicant _____
 Birthdate of Spouse _____

Occupation _____ Spouse Occupation _____
 Employer _____ Employer _____
 Address _____ Address _____
 City _____ State _____ Zip _____ City _____ State _____ Zip _____

2. Membership Classifications

X			Dues	Dues
	<i>Classification</i>	<i>Privileges***</i>	<i>Monthly</i>	<i>Annual</i>
	Full Family*	GC,CH,P,RC,VT All-Inclusive	\$322	\$3550
	Regular Family*	GC,CH,P,RC,VT	\$267	\$2900
	Social*	CH,RC,P,,VT	\$69	\$816
	Young Adult Full* (Ages 18-39)	GC,CH,P,RC,VT All-Inclusive	\$167	\$2000
	Young Adult	GC,CH,P,RC,VT	\$113	\$1350
	Non-resident* (Surrounding Counties including Clark, Jasper, Lawrence, Richland, Sullivan, Knox)	GC,CH,P,RC,VT	\$75	\$900
	Non-surrounding county	GC,CH,P,RC	\$50	\$600
	College Student Membership (Ages 18-23)	GC,P,RC	NA	\$300
	Business Sponsorship Membership	GC,CH,P,RC	NA	1st year \$4500, 2 nd year \$5500

* **Optional Equity for all classifications receive Equity Perk Package (\$1,000 or \$30/mo for 36mos.)**

\$25 monthly capital fee is required for all categories except Non-Surrounding and Student

Equity Perk Package includes:

Discounted Cart and 4 Guest Passes w/ Cart, 10 Pool Guest Passes, Discounted Golf Lessons, 3 - Complimentary Nights at Resort

**** FREE RANGE BALLS FOR ALL MEMBERSHIP CLASSIFICATIONS**

***Privilege Codes:

All-Inclusive Includes: Cart Fees, Locker plus all other privileges.

GC-18 Hole PGA Championship Golf Course

CH-Clubhouse Dining & Entertainment

P-Swimming Pool

RC-Recreational Activities: Tennis, Racquetball

Boating & Fishing

VT-Vote at Membership Meetings (Equity Only)

4. Billing Preferences:

Indicate billing preferences for dues: Monthly (auto) Annual
Members are responsible for one year of dues figured as of the start of the following membership year (**January 1**). Contact the Club for details. All fees subject to change without notice.
Credit Card Number _____ Exp. _____ 3 dig Code _____

5. Equity Certificates:

All Equity Certificates will be issued and voting privileges will be activated once the \$1,000 obligation has been met. Equity perks will be granted immediately after membership applications is executed.

Would you like to upgrade to the Equity membership? **YES** **NO**

6. Have you been a member before? YES NO Year? _____

7. Personal References: (list two)

Name _____	Name _____
Address _____	Address _____
Phone _____	Phone _____

8. Credit References: (list two)

Name _____	Name _____
Address _____	Address _____
Phone _____	Phone _____

9. Signatures:

Applicant proposed by: _____

By gaining membership into QCCC, I agree to pay all dues, any assessments, and fees **for one calendar membership year**. Termination of membership must be in writing to the board of directors postmarked in the month of December of the membership calendar year.

If approved as a member of QCCC, I agree to abide by the Rules and Regulations of the Quail Creek Country Club.

The applicant shall be responsible for all costs and fees incurred in any collection action commenced against applicant for the collection of dues or other charges incurred relating to this membership, including but not limited to, court costs and attorney's fees. Applicant agrees that any litigation commenced under the terms of this agreement shall be commenced and prosecuted in the Circuit Court of Crawford County, Illinois.

Applicant(s) Signature: _____

For Office Use Only:

Date Received _____

Equity Payment Received _____

Board Approval Date _____

Account Set Up _____

Membership # _____ Certificate # _____