

2009 CUMBERLAND GOLF CLUB MEMBERSHIP APPLICATION

Last Name: _____ First Name: _____ Spouse: _____

WINTER Mailing Address: _____ EMAIL Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: WINTER _____ SUMMER _____

MEMBERSHIP FEES (Tax Included): Applicant agrees to abide by the Club Rules and Policies, see refund policy on back...)

	Before Jan. 1 st	Starting Jan 1 st	TOTAL FEES
Single	_____ \$525	_____ \$545	\$ _____
Husband & Wife	_____ \$740	_____ \$765	\$ _____
Single with Children (See Child Restrictions Below...)	_____ \$615	_____ \$635	\$ _____
Family (See Child Restrictions Below...)	_____ \$800	_____ \$830	\$ _____
<ul style="list-style-type: none"> • Includes up to two children actively enrolled in school, up to 25 yrs. Of age. List Children and Grade in School. • Each additional child is 75.00 each 			
1. _____ grade: _____	2. _____ grade: _____	3. _____ grade: _____	
4. _____ grade: _____	5. _____ grade: _____	6. _____ grade: _____	

Associate Member - No Restrictions *Young Adults 18-25	_____ \$210	_____ \$220	\$ _____
Youth Membership - See Restrictions on the Backside Up Thru age 17	_____ \$150	_____ \$150	\$ _____
20-9 Hole Play Pass - Good for 2009 Only	_____ \$250	_____ \$260	\$ _____

10-Play Guest Pass --To be used when playing with the member. _____ \$135 _____ \$140 \$ _____

Optional Handicap System Fee for Students or Non-members _____ \$25 _____ \$25 \$ _____

OTHER FEES:

Cart Shed Rental – Gas Shed #: _____ _____ \$390 _____ \$415 \$ _____

- Includes Trail Fees

Cart Shed Rental – Electric Shed # _____ _____ \$440 _____ \$440 \$ _____

- Includes Trail Fees

*Note: Cart Shed Rental Fees must be paid by **April 1, 2009 or be assessed a \$30.00 late fee.**

Annual Cart Rental – Single Seat _____ \$450 _____ \$460 \$ _____

Annual Cart Rental—Double Seat _____ \$750 _____ \$770 \$ _____

Annual Trail Fee ID # _____ _____ \$255 _____ \$265 \$ _____

Annual Club Storage _____ \$125 _____ \$130 \$ _____

Unlimited Range balls _____ \$100 \$ _____

Total Paid \$

Date: _____ Approved By _____

(715) 822-4333 fax: (715) 822-5418 www.cumberlandgolfclub.com email: cumbgolf@centurytel.net

Make Checks payable to: Cumberland Golf Club 2400 5th Street, Cumberland, WI 54829

*Credit Card Information: Card Type: VISA or MC

Number: _____

Expiration Date: _____ Name On Card: _____

REBATES OR CREDITS FOR HEALTH REASONS

Prior to November of 2002, the Board had no written policy regarding rebates or credits when members are unable to play golf for health reasons or in the event of the death of a member. The policy, which was adopted November 14, 2002, is strictly adhered to so as to provide consistency and fairness to all. The policy is as follows:

Rebates, credits, or membership credits will be made for disability or death as follows:

1. Requests must be in writing and submitted on or before the start of the golf season or June 30th, as appropriate.
2. Sickness or Disability (Substantiated in writing by medical authority)
 - Before start of the golf season-full credit toward next year's membership
 - Before July 1st-1/2 credit toward next year's membership
 - July 1st and thereafter-no credit
3. Death of a member
 - Full rebate before the start of the golf season
 - 1/2 rebate before July 1st
 - No rebate starting July 1st

Restrictions

Youth Membership

- Play Mon-Thurs and Sun after 2:00 pm May 26th--Sept 5th
- Play without restrictions from Opening--May 26th & Sept 6th--Closing