



(315) 446 - 1885

## 2025 Membership Application

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

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

Phone #: (Cell) \_\_\_\_\_ (Home) \_\_\_\_\_

E-Mail: \_\_\_\_\_

|                                | <b>Membership</b> |                        |
|--------------------------------|-------------------|------------------------|
| Individual                     | \$699.00          | \$ _____               |
| Senior (62 and above)          | \$649.00          | \$ _____               |
| Military                       | \$629.00          | \$ _____               |
| Junior (under 18)              | \$349.00          | \$ _____               |
| Weekday (non-holiday)          | \$599.00          | \$ _____               |
| Single Seat Cart               | \$549.00 + tax    | \$ _____               |
| Add a spouse to any membership | \$350.00          | \$ _____               |
|                                |                   | <b>Total:</b> \$ _____ |

Payment Method \_\_\_\_\_ Date: \_\_\_\_\_

Add a Spouse Name: \_\_\_\_\_