SOUTH MOUNTAIN GOLF COURSE P.O. BOX 394 MONT ALTO, PA. 17237 2024 MEMBERSHIP APPLICATION

MEMBERSH	IIP NUMBI	ER		APPLICATION DATE		
NAME				PHONE		
STREET AD	DRESS					
TOWN AND	ZIP					
EMAIL						
		MEMBER	RSHIP TYPE (PL	EASE CIRCLE)		
SINGLE			FAMILY	X STUDENT		
NAME OF FA	AMILY ME	MBERS				
AMOUNT E	NCLOSED		CHECK / C.	ASH / CC AT GOL	F COURSE	
FILL OUT C	OMPLETE	LY AND RETU	JRN WITH PAYN		OX 394	
CHECKS MADE PAYABLE TO SOUT				MONT ALTO, PA 17237 MOUNTAIN GOLF COURSE		
			MBERSHIP FEES			
Before MARCH 1, 2024 SINGLE \$390.00 (WITH CART \$5			2024	After	MARCH 1, 2024	
SINGLE	\$390.00	(WITH CAR	Г \$560.00)	\$440.00 (WIT	H CART \$625.00)	
FAMILY	\$560.00	(WITH CART	5 \$860.00)	\$650.00 (WIT	H CART \$950.00) r 16 yrs Cart \$500.00)	
STUDENT	\$300.00	(over 16 yrs 0	Cart \$450.00)	\$325.00 (ove	r 16 yrs Cart \$500.00)	
NOTE***FA	MILY MEN	ABERSHIP IS	TWO PEOPLE L	IVING IN THE SA	ME HOUSEHOLD ANY	
				(18 YEARS AND		
					EY BECOME MEMBERS	
WILL RECE	IVE A \$25.0	00 GIFT CERT	IFICATE. LIMIT	ONE PER MEME	BER.	

WE RECOMMEND THE FOLLOWING FOR MEMBERSHIP:

NAME

ADDRESS