For office use only				
Date Received:	Approved by:			
Date Approved:	Effective Date of Membership:			
Membership Number:	Authorized Signature:			
Initiation Paid:				

6500 TURNBERRY DRIVE • PADUCAH, KY 42001 (270) 554-7914 WWW.CCOFPADUCAH.COM



Application for Membership



Membership Category Desired: • Premier Member

Personal Information

- o Corporate Member
- Executive Member (ages 31-39)
- Associate Member (ages 21-30)
- o Recreation Member
- Recreation Young Professional Member (ages 21-34)
- O Social Member
- Social Young Professional Member (ages 21-34) Non-Resident Member

Name					
Title	First	Middle Initial		Last	Nickname
Home Address	Street		City	State	Zip Code
Home Phone Number			•		
Date of Birth					
Email Address					
o Single o Married	o Divorced	o Widowed	If married, please fill out the Spouse information below:		
Spouse's Name					
Call Phone Number	First	Middle Initial	Wadding Amniyansan	Last	Nickname
Cell Phone Number			wedding Anniversar	y Date	
Date of Birth					
Spouse's Email Address					
Business Informati	ion				
Applicant's Occupation and	d/or Nature of Bus	iness or Profession			o Retired
Name of Company			Title		
Business Address					
	Street		City	State	Zip Code
Business Telephone Numb	er		_ Years in Present Em	ployment	
Email Address					
Education Background					
Spouse's Occupation and/o					O Retired
Name of Company			Title		
Business Address					
Business Telephone Number					
Email Address					

Education Background _____

Dependent Children

Please list only dependent children living at home or stud Name	lents under the age of 24: Date of Birth	Male	Female
		О	О
		0	O
		О	О
Reference Information			
Please list names of other country clubs, city clubs, golf of Please list city and state where club is located, length of a board member:			
Please list The Country Club of Paducah members with w	whom you have social or business contacts:		
Names of other organizations or associations in which yo	ou hold or have held membership:		
What club facilities do you plan on using regularly? (Plo Dining: O Casual/Bar O Formal Dining O Banq Sports: O Golf Course O Tennis Courts O Pool	uet • Meeting Rooms		
If elected to membership at The Country Club of Paducal O Yes O No	h, would you be willing to serve on committees o	r enter into Cl	ub activities?
Authorization			
By signing this application for membership, I hereby authormy financial condition, our family and professional backgroorganizations.			
The undersigned does hereby acknowledge, accept and under questions. If my application for membership is granted, I ag Country Club of Paducah in the present form or as may be a request).	gree to observe and be bound by the by-laws and Ru	les and Regula	tions of The
I agree to pay my monthly statement by the 20th of each mo account is deemed delinquent in accordance with Club Rules credit card account on file with the Club at all times. Should such past-due amount to my credit card. I also agree to pay fees to collection agencies of not less than 40%. Such continuoun account default and our referral of your account to said	s and Regulations, as well as the by-laws. I also agr d my account become delinquent, I agree the Club's all costs of collection including attorney's fees, coll ngency fees will be added and collected by the colle	ree to maintain shall have the r ection fees and	a current ight to bill contingent
Card Type Account Number	Exp. Date/	V-code	
I acknowledge, accept and understand that I am personally I any of my family members who will be utilizing The Country		lating to my m	embership and
Signature of Applicant	Date		
Signature of Member Sponsor	Date		