

2024 Membership Application

	Member Information			
M	Name:			
W	Address:	Last	First	M.I.
	71001001	Street Address		Apartment/Unit #
CLOUSE HOUSE G O L F		City	State	ZIP Code
	Phone:	 	Email:	
Golf Membersh	ip (please circ	le one):		
Single (7)	Senior 57+	/Veteran (7)	High School Golf (5)	Couples/Family (7)
Single (5)	Senior 57+	/Veteran (5)	Junior 18 & under (5)	Couples/Family (5)
Cart Membershi _l Add GHIN HANI Add Trail Fee (\$	p? DICAP # (\$35)? 400)?	YES YES YES	NO * includes golf NO Current GHIN NO	f and ½ cart #
Spouse / Child Information (if applicable)				
Spouse's Name) :			
	Last, First		Email	Phone
_ : Child's Name	 Last, First		 Email	Phone Age
Child's Name:	,			3
Last, First			Email	Phone Age
Clouse House Golf Courses include Birch Run Golf Club, Fostoria Country Club, Hillcrest Golf Club and Loudon Meadows Golf Club. Memberships are non-transferable and non-refundable.				
Memberships may be revoked if member acts irresponsibly.				
Amount Receive	ed: \$			
Payment Type: Cash Check			Credit Card (add 4% surcharge)	attach receipt here*
BRGC FO	CC HCGC	LMGC _		