



Membership Application

1400 E. Hwy 119 • Longmont, CO 80502-0762 • 303.651.3777

April 1, 2019



Type of Membership Desired

Check One: Full Member Junior Member (age 39 or Younger)
 Senior Member (age 70 or older) Individual Member Youth Member
 Seasonal Member (out of State for 6 months or more) Social Member

Personal Information

Name: _____

Local Address: _____

City, State Zip

Other Address: _____

City, State Zip

Date of Birth _____ * applies to Senior, Junior and Youth memberships -

Single Married

**we need a copy of Driver's License*

Spouse/Significant Other Name: _____

Member Cell Phone: _____

Member Email: _____

Spouse/Significant Other Cell: _____

Spouse/Significant Other Email: _____

Please select the email where your member statement will be sent to:

Member Spouse/Significant Other

Please list your dependent children under the age of 24.

Date of Birth Male Female

_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Business Information

Member

Name of Company: _____ Title: _____

Business Address: _____
City, State Zip

Business Phone: _____ E-mail Address: _____

Spouse/Significant Other

Name of Company: _____ Title: _____

Business Address: _____
City, State Zip

Business Phone: _____ E-mail Address: _____

Membership Fees

Each new member must pay a Membership Fee to join the Fox Hill Club. Membership fees may change (annually on April 1). The current Membership Fees are:

Golfing Membership -- \$7500

Social Membership -- \$1500

Referring Member for Golf Membership (if applicable) _____

Amenity Options

Please sign me up for the following:

- Club Storage \$120
- Pull Cart Storage \$100
- Locker \$50
- Inclusive \$200



Authorization

By signing this application for membership of *The Fox Hill Club* (hereinafter "Club"), I, the undersigned* authorize the Club, through its representatives, to make inquiries into my financial condition (specially through consumer credit reporting organizations) and my family and professional background.

I, represent that, to the best of my ability, I have truthfully answered all *Membership Application* questions.

I understand that, if I wish to resign my membership, I must give the Club 60 days notice from the 1st day of the month following my resignation: my account must be current in order for the Club to accept my resignation; I am responsible for all dues and applicable fees during the 60 day notice period, including F&B minimums; and the Membership Fee I have paid is non-refundable

I understand that resignation from the Club is effective for three (3) years but that I may rejoin by paying all back dues that would have accrued during that period.

I agree to maintain a current credit card account on file with the Club at all times. Should my account become delinquent, I agree the Club shall have the right to bill past-due amounts to my credit card at any time.

I agree to keep my contact information on file with the club and to inform the club of any changes.

I acknowledge, accept and understand that I am personally liable and responsible for all financial obligations relating to my membership and anyone on my membership who will be utilizing Club's facilities.

I acknowledge that I have received and agree to be bound by the terms, policies, and rules described in this *Membership Application* , the *Membership prospectus*, and the *Member Policies* of the Fox Hill Club in their present form or as may be amended.

** the singular pronoun is used for convenience but all parties signing the Application are bound by the terms of the Application*

Signature of Applicant: _____ Date: _____

Signature of Spouse/Significant Other: _____ Date: _____

Credit Card Information

Credit Card Type: Visa Mastercard American Express

Credit Card Number: _____ CVC _____ Expiration Date: _____

Cardholder's Name: _____

Cardholder's Signature: _____

Please sign me up to bill my credit card monthly



~Congratulations~

Welcome, I am delighted you have made the decision to join The Fox Hill Family! Please feel free to contact me anytime if there is anything I can do to assist you. If you are interested, I can pair you with similar members of the same interests to build relationships. Don't forget to check the social calendar for events each month. Again , welcome to The Fox Hill Family.

Sincerely,

Kristine Field
Membership Director



The Fox Hill Club