

The Salem Country Club
600 Country Club Drive
Salem, OH 44460
(234) 564-2997



APPLICATION FOR MEMBERSHIP

Date: _____

Name in Full: _____ Birth Date: _____ City/State of Birth: _____

Home Address: _____ City: _____ State: _____ Home Phone: _____

Cell Phone: _____ Email Address: _____

Spouse's Name: _____ Birth Date: _____ City/State of Birth: _____

A family membership includes unmarried children under the age of 25 living at home. List qualifying children below:

<u>FULL FIRST & LAST NAME</u>	<u>DATE OF BIRTH</u>	<u>FULL FIRST & LAST NAME</u>	<u>DATE OF BIRTH</u>
1. _____	_____	3. _____	_____
2. _____	_____	4. _____	_____

Applicant's Occupation: _____ Employer: _____

References: At least one (1) additional Club member must sign your application:

1. Name: _____ Signature: _____ Phone: _____

Years as Club member: _____ How are you acquainted with the applicant? _____

2. Name: _____ Signature: _____ Phone: _____

Years as Club member: _____ How are you acquainted with the applicant? _____

Signature of Applicant: _____

After completing and signing this application, including the signature of at least one Club member, please mail it along with the \$50 application fee to the address below. You will be billed for the dues after the application has been reviewed and accepted by the Board. Call Board President (234-564-2997) with any questions.

The Salem Country Club
C/O Membership
P.O. Box 994
Salem, OH 44460

