



# *Race Brook Country Club*



## *Membership Information*

246 DERBY AVENUE ♦ ORANGE, CT 06477  
(203) 389-9521 ♦ [WWW.RACEBROOK.ORG](http://WWW.RACEBROOK.ORG)

# MEMBERSHIP APPLICATION

## CHECK TYPE OF MEMBERSHIP DESIRED

- Family Member     Junior Executive     O'Sullivan Family Member     Social Member
- 1 Locker/Bag Room Storage/Range     2 Lockers/2 Bag Room Storage/Family Range

## PERSONAL INFORMATION

Name: \_\_\_\_\_

Primary Address: \_\_\_\_\_

Winter Address: \_\_\_\_\_

Length of time at primary address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Spouse's Email Address: \_\_\_\_\_

Spouse's Date of Birth: \_\_\_\_\_ Wedding Anniversary Date: \_\_\_\_\_

- Single     Married     Divorced     Widowed

Please list your dependent children under the age of 25:

Date of Birth:

_____	_____
_____	_____
_____	_____

## STATEMENT AND NEWSLETTER PREFERENCE

I prefer to receive my monthly statements, flyers, and newsletters via *(please check all that apply)*:

- Email..... Home email     Business email  
 Mail..... Home address     Business address

Please list any membership in other clubs, fraternities or organizations and positions held:

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## AUTHORIZATION

The undersigned does hereby acknowledge, accept and understand that I have truthfully and to the best of my ability answered all the application questions. If my application for membership is granted, I agree to observe and be bound by the Bylaws and Rules and Regulations of Race Brook Country Club in the present form or as may be amended. I also agree to maintain a 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 such past due amount to my credit card.

Card Type	Account Number	Expiration Date	CID Code
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I acknowledge, accept and understand that I am personally liable and responsible for all financial obligations relating to my membership and any of my family members who will be utilizing Race Brook Country Club. I understand and agree that I (we) shall be liable for any delinquent amounts owed the plus collection agency and attorney's fees, court costs, and all other charges with the collection of the debts, together with interest at the maximum allowed by law.

Signature of Applicant	Date
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Signature of Spouse	Date
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Signature of Proposer	Date
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## BUSINESS INFORMATION

Applicant's Nature of Profession or Retired:	
Name of Company :	Title:
Business Address :	Business Email Address:
Business Telephone Number:	Fax Number:
Years in present employment :	
Spouse's Occupation or Retired:	Title:
Name of Company and Address:	
Business Telephone Number:	Fax Number:
Years in present employment:	Business Email:

# MEMBERSHIP AGREEMENT

I, \_\_\_\_\_, hereby apply for the following membership:

- Family Member     
  Junior Executive     
  O'Sullivan Family Member     
  Social Member

If my membership is approved, I will be entitled to full membership privileges for such membership category through December 31, 2020. There shall be no initial initiation fee for the preview membership term through December 31, 2020. If I leave prior to fulfilling the 2-year commitment, I understand that the initiation fee is due in full, as outlined on the next page. By electing to join as a Member, I further agree to the following terms and conditions as they relate to my membership category.

1. **Commitment to membership for a minimum term through December 31, 2020.** I will be committed to membership within the above category through December 31, 2020. I will be responsible to pay all of my usage expenses (such as carts, food and beverages). There is no Initiation Fee with a two year commitment. Commencing on January 1, 2019, should I decide to leave prior to December 31, 2020, I will be responsible to pay the initiation fee for my membership category. I will be responsible to pay all applicable monthly fees and charges (including usage expenses) each month during the membership term concluding on December 31, 2020. A \$500 deposit is required with your application as part of establishing your member D.A. account. It will be applied against expenses incurred at the club. An early termination fee may apply based on the remaining months in the contract.
2. **Continuation of Membership.** I shall have the ability to continue my membership with all of its privileges after the conclusion of my initial term ending December 31, 2020
3. **Privileges and limitations.** I shall be entitled to the use of the club facilities and involvement in all club activities (including major club tournaments/events as determined by Race Brook Country Club) and usage privileges in the category of membership in which I am approved. Additionally, I understand my membership payments are not transferable or refundable.
4. **Race Brook Country Club By-Laws.** I agree to be bound by the By-Laws and Rules and Regulations as established and may be amended by Race Brook Country Club from time to time. Any change in status or cancellation of membership requires a minimum of 6 months advance written notice to the General Manager or Board of Governors.
5. **Recallable Membership.** The club has the absolute right and discretion to recall my membership at any time before the initial 2-year period terminates (December 31, 2020). If the club exercises its right, I remain obligated and promise to pay dues and charges incurred through the end of the month in which the club exercises its right to recall said membership.
6. **Final Interpretation.** The Board of Governors reserves the right to make final decisions pertaining to all matters regarding the Preview Membership initiative.

Applicant's Name:	Co-Applicants Name:
Signature	Signature
Date	Date

If on or before December 31, 2019, I commit to a two-year term of membership through December 31, 2020, the initiation fee will be waived as follows:

Waived Initiation Fees with 2-Year Commitment:

Family Member:	\$15,000
Junior Executive Member:	\$8,000
O'Sullivan Family Member:	\$5,000
Social Member:	\$2,000

In accordance with the Membership Agreement, I understand that I will be responsible to pay the initiation fee for my member category if I leave prior to December 31, 2020.

Applicant Signature	Date
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## MEMBERSHIP PACKAGE PRICING

Class	Prepaid Dues Pricing  <i>*If paid in full upon acceptance</i>	Annual Dues  <i>*If paid quarterly March Sept June Dec</i>	Food & Beverage Minimum  <i>*March-December</i>	Guest Pass Package  <i>*Billed separately from Annual Dues</i>
<b>Family</b>	\$8500.00*	\$9000.00*	\$175.00	\$500.00
<b>Junior Executive</b>	\$4250.00*	\$4500.00*	\$140.00	\$250.00
<b>O'Sullivan Family</b>	\$3750.00*	\$4000.00*	\$140.00	\$250.00
<b>Social</b>	\$2250.00*	\$2500.00*	\$140.00	N/A

- ◆ Taxes apply\*
- ◆ Guest Pass Packages billed separately
- ◆ With Guest Pass Package, Green Fee is charged at \$50 a guest instead of the standard Green Fee of \$95