



Old South Country Club  
P.O. Box 281  
Lothian, MD 20711

## APPLICATION FOR ADMISSION

Type of Membership (circle one)		GOLF	TENNIS	SOCIAL	
<b>TRIAL MEMBERSHIP</b>					
Full name			Date of Birth		
Home Address					
City, Town Post Office		State	Zip Code	Telephone	
Business/Company Name			Number of Years	Business Telephone	
Business Address					
Profession or Occupation			Cell Phone		
Email Address			<input type="checkbox"/> Married <input type="checkbox"/> Unmarried		
Professional Associations					
<b>SPOUSE</b>					
Full Name					
Profession or Occupation			Business Telephone		
<b>CHILDREN</b>					
Full Name			Date of Birth		
Full Name			Date of Birth		
Full Name			Date of Birth		
Full Name			Date of Birth		
Full Name			Date of Birth		
Signature of Applicant			Date		
Name of Sponsor		Club #	Name of Co-Sponsor		Club #
Signature of Sponsor			Date		
Signature of Sponsor			Date		

## Application for Trial Membership Statement of Agreement & Understanding

This application will not be acted upon unless fully complete, signed, and accompanied by appropriate fees. It is the policy and practice of Old South Country club not to discriminate on the basis of race, color, religion, gender, or national origin.

- (1) **Application for Membership:** I (we) hereby apply for membership to Old South Country Club (the "Club") and agree to abide by its rules and bylaws as they now exist or later amended. If approved for membership, I (we) agree to render timely payment of all dues, fees, and other such charges incurred or for which I (we) become obligated. I (we) authorize the disclosure and release of information to Old South Country Club by those persons and entities named herein for the purpose of determining my (our) eligibility for membership.
- (2) **Approval for Membership:** I (we) understand that membership is contingent upon approval, which shall be in the Club's sole discretion as exercised by the Membership Committee and board of Directors (the "Board"). I (we) understand that that I (we) shall be notified by the Club of the disposition on this application within four weeks of the date it is received by the Club's Membership Committee. If approved, I (we) understand that membership is granted until September 30th of the current year and that it will be renewed automatically from year to year unless otherwise terminated. It is agreed that if this application is not acted upon favorably, all funds paid to or deposited with the Club, less any charges incurred but paid for goods or services received, shall be refunded immediately and without interest.
- (3) **Payment of Dues:** I (we) understand that I (we) must pay the dues consistent with my (our) class of membership for a period of twelve months, excluding the months of January and February. The relevant twelve month period shall begin on the first day of the first month after this application has been accepted by the Board of Governors.
- (4) **Resignation:** I (we) understand that resignations are accepted thirty days in advance of the final billing date and require written notice to the Board. I (we) understand that resignations which occur prior to the end of the required twelve month period will not nullify the commitment to pay the full dues to the satisfaction of this contract.
- (5) **Amounts Owed:** I (we) understand that all dues payments and other charges incurred are due and payable upon receipt of the billing statement from the Club. I (we) understand that a member's account becomes delinquent and past due on the 45th day following the day upon which the billing was made. In the event any amounts owed have not been paid within 60 days after becoming due, I (we) understand that our membership privileges may be suspended until such time as the amounts owed have been paid in full. I (we) understand that a \$1,000 deposit is due at the time of signing and will be refunded at the conclusion of the trial period and after my (our) membership account has been cleared.

By my (our) signature(s) below, I (we) certify that I (we) have read, understand, and agree to the forgoing as conditions of membership in Old South Country Club.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Spouse (If Applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Date: \_\_\_\_\_

Board of Directors Approval:       Yes     No

\_\_\_\_\_  
President

\_\_\_\_\_  
Date