



2017 Membership APPLICATION
RiverWinds Golf and Tennis Club

Applicant/Primary Member

Full Name Birth Date

Residence City State Zip

Home Phone Mobile Phone

E-mail Address

Driver's License (Primary)

NON-TRANSFERABLE

FEE

10% RESIDENT DISCOUNT

Table with 3 columns: Pass Type, FEE, and 10% RESIDENT DISCOUNT. Rows include Weekday Pass, Senior Weekday Pass, Husband & Wife Weekday Pass (unlimited), One Day Pass (Mon-Thurs), Twilight (7 Days, after 3pm), Corporate Pass (100 passes), Additional Tennis, and Additional Tennis (Husband & Wife Pass).

Credit Card Information

Cardholders Name (As it appears on the card)

Billing Address

Phone Number

Card Number CVV Security Code Exp. Date

Amount Authorized to be charged \$

Cardholder signature authorizing RiverWinds Golf & Tennis Club to charge listed for the amount specified on this form.

Signature Date