



APPLICATION FOR MEMBERSHIP

Primary Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Local Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Northern Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Phone # \_\_\_\_\_ Primary Cell # \_\_\_\_\_

Northern Phone # \_\_\_\_\_ Spouse's Cell # \_\_\_\_\_

Primary Email \_\_\_\_\_ Spouse Email \_\_\_\_\_

Circle Status:      Single      Divorced      Widow (er)      Married

Primary Date of Birth \_\_\_\_\_ Spouse's Date of Birth \_\_\_\_\_

Primary Place of Birth \_\_\_\_\_ Spouse's Place of Birth \_\_\_\_\_

Unmarried Children of Applicant under age of 24 living at home or attending school full-time:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

EMPLOYMENT INFORMATION

Primary Applicant Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Years in Employment \_\_\_\_\_

Spouse's Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Years in Employment \_\_\_\_\_

REFERENCES

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Years Known \_\_\_\_\_

CURRENT AND PREVIOUS COUNTRY CLUB AFFILIATIONS

Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From: \_\_\_\_\_ To \_\_\_\_\_

Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From: \_\_\_\_\_ To \_\_\_\_\_

Please indicate the category of membership desired by placing a check in the appropriate box below:

Full Membership    Sports Membership    Lifestyle Membership    Social Membership

Desired start date: \_\_\_\_\_

Upon signing this Application for Membership Privileges, I authorize the disclosure and release of information to Vineyards Country Club, Inc. for investigating my qualifications for membership and authorize those persons or entities herein to furnish information to Vineyards Country Club, Inc.

I understand that acceptance for membership in Vineyards Country Club, Inc. is subject to approval by Vineyards Country Club, Inc. and payment of the required membership contribution, dues and charges.

Primary Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

APPROVED AND ACCEPTED

Vineyards Country Club, Inc.

By \_\_\_\_\_

Date \_\_\_\_\_

Vineyards Country Club  
400 Vineyards Blvd  
Naples, FL 34119  
(239) 353-1500