

Neshaminy Valley Golf Club
 440 Almshouse Road, P.O. Box 439 Jamison, PA 18929
 (215)343-6930

I WOULD LIKE THE FOLLOWING MEMBERSHIP FOR THE **2020** GOLF SEASON:

NEW MEMBERS FORM***

New Weekday or Full Members ONLY Get 10 FREE CART FEES
If possible, please Pay Membership Fees with Cash or Check. Thank you.

	Membership Fee Totals	Enter Amount Enclosed
<hr style="border-top: 1px dashed black;"/>		
FULL Membership		
Paid by December 31, 2019	\$1,400.00	_____
--Spouse or child under 21 - Each	\$475.00	_____
	TOTAL:	_____
WEEKDAY Membership		
Paid by December 31, 2019	\$1,200.00	_____
--Spouse or child under 21 – Each	\$375.00	_____
	TOTAL:	_____
ASSOCIATE Membership		
Paid by December 31, 2019	\$42.00	_____
	TOTAL:	_____
HANDICAP ANNUAL SYSTEM (Optional)		
(Per Person/Year) GHIN# _____	\$38.00	_____
(GAP price increase \$3)		
	TOTAL:	_____

*****CURRENT MEMBER if you get someone to join as a NEW FULL OR WEEKDAY (Never Joined Before) MEMBER we will give you 10 FREE 18 HOLE CART FEES!**

I UNDERSTAND THAT MEMBERSHIP FEES ARE NON-REFUNDABLE (IN FULL OR IN PART) AND ARE NON-TRANSFERABLE. I AGREE TO ABIDE BY ALL CLUB RULES AND UNDERSTAND THAT MY MEMBERSHIP MAY BE TERMINATED FOR VIOLATIONS OF THE RULES. PLEASE ENTER ALL INFORMATION:

*****SIGN HERE: _____ DATE: _____

PRINT NAME: _____ EMAIL: _____

TELEPHONE: _____ Member # (if known): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SPOUSE OR CHILD UNDER AGE 21:

SPOUSE: FIRST NAME _____ INITIAL _____

CHILD: FIRST NAME _____ INITIAL _____ DOB _____

CHILD: FIRST NAME _____ INITIAL _____ DOB _____