



Application for Social Membership
in Twin Oaks Country Club

Full Name: _____
SSN#: _____ Birthdate: _____
Residence Address: _____
Zip: _____ Phone: _____
E-mail Address: _____
Company Name: _____
Position: _____
Number of Years: _____ Phone: _____
Name of Spouse: _____
SSN#: _____ Birthdate: _____
Spouse Employer: _____
Position: _____
Number of Years: _____ Phone: _____
Number of Children Living at Home: _____
Name: _____ Sex: _____ Birthdate: _____
Name: _____ Sex: _____ Birthdate: _____
Name: _____ Sex: _____ Birthdate: _____

Club Affiliations (Previous Country Club if Applicable)

References:
Current Bank: _____ Creditor: _____
Regular Member: _____
Regular Member: _____
Non-Member: _____
Non-Member: _____

Initial Fee

The Initial Fee is \$550, which must accompany this application.

If this application is rejected, Twin Oaks Country Club (“TOCC”) shall return said sum to Applicant.

1020 E. Republic Road
Springfield, MO 65807

Phone: 417-881-4537
Fax: 417-881-3331
Email: twinoaks@twinoakscountryclub.com

Dues

Dues for Social members on the date of this application are \$128 per month or \$1475 annually. Applicant shall pay dues (monthly) annually).

Food Minimum

All categories of membership have a \$45 per month Food Minimum. Members with surnames beginning with letters A through K are on a billing cycle of the first day of the month through the end of the month. Members with surnames beginning with letters L through Z are on a billing cycle of the sixteenth day of the month through the fifteenth day of the following month.

Conditions

Applicant understands this application is subject to approval by the Board of Directors of TOCC. If accepted, this application becomes a contract between Applicant and TOCC. Applicant agrees that all persons using TOCC under Applicant's membership, including Applicant, are bound by and must comply with all by-laws, rules and regulations of TOCC as they now exist or may hereafter be amended. Applicant shall timely pay all charges and fees incurred by (a) Applicant and members of Applicant's family as defined in Article II, Section 12, of the by-laws, and (b) any Significant Other designated by Applicant pursuant to Article II, Section 12.

Signature of Applicant

I hereby recommend the above applicant for membership at Twin Oaks Country Club.

(Signature of Regular member other than listed as a Reference)

Acceptance

This application accepted by the Board of Directors _____, 200__.

Signature of Officer

Title