

 Fayetteville Golf & Country Club
Application for Membership

P.O. Box 635
2216 Lewisburg HWY
Fayetteville, TN 37334
(931) 433-2962
Fax: (931) 433-2183
fgcc@fayelectric.com

MEMBERSHIP INFO:

Membership Type: ___ Full Member ___ Junior ___ Non-Resident ___ Social Plus ___ Social

Member Category: ___ Family ___ Single

Applicant Info:

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____ Email: _____

Occupation: _____ Employer: _____

Dependent Info:

Spouse Name: _____ Date of Birth: _____

Occupation: _____ Employer: _____

Work Phone Number: _____

Dependent Children (Living at home or student under the age of 26)

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Sponsor: _____

Comments: _____

Applicant Signature: _____ **Date:** _____

Note: By signing the above application, I agree to abide by the rules and regulations set Forth by the Board of Directors and/or by-laws of the Fayetteville Golf & CC (FGCC). I further understand, I agree to pay my monthly bills for the period I am a member. I also understand that I may not downgrade or cancel my membership until the Beginning of FGCC's following fiscal year.

Approved: _____ **Date:** _____

Disapproved: _____ **Date:** _____