

Member # _____

Member # _____

Type _____

**BETHLEHEM COUNTRY CLUB
2019 NON-BETHLEHEM RESIDENT MEMBERSHIP APPLICATION**

APPLICANTS:

Last Name(s): _____ First Name(s): _____

Mailing Address: Street _____
Town _____ State _____ Zip Code _____
Phone _____ Work _____

E-MAIL ADDRESS:

Please print clearly as we will use this address to correspond

MEMBERSHIP TYPE:

AMOUNT PAID: (CIRCLE ALL THAT APPLY)

		<u>EARLY BIRD</u>	<u>AFTER 5/15</u>
Single:	Full Time	\$525	\$550
	Midweek	450	475
	FT College Student	225	250
	Junior	125	150
	Seasonal Cart	475	500
Couple:	Full Time	825	850
	Midweek	725	750
	Seasonal Cart	875	900
Family:	Full Time	975	1000
10 Card:	Play – 18 Hole	275	275
	Play – 12 Hole	200	200
	Ride – 18 Hole	180	180
	Ride – 12 Hole	140	140
	GHIN:	BCC Member	30
Non Member		40	40

TOTAL PAYMENT AMOUNT: _____

PAYMENT METHOD: Cash _____ Check _____ Credit Card _____

If using your VISA or MASTERCARD, please complete and sign below

Account # _____ Exp. Date _____

Signature _____

Please make checks payable to: Bethlehem Country Club

Mail to: Bethlehem Country Club

PO Box 189, Bethlehem, NH 03574

Questions Call 603-869-5745 (April 15th to October 31st) 603-616-1166 (Off Season)

MEMBERSHIPS ARE NON-REFUNDABLE AND NON-TRANSFERABLE