



Membership Application

7 Day Membership Type -

	Single	Couple	Buddy	Family	Junior
Adult Prices	\$650	\$1,100	\$1,200	\$1,600	\$300
Senior Prices	\$600	\$1050	\$1,150		

First Name: _____ Last Name: _____

Email: _____

Cell: _____

Street Address: _____

City: _____ Postal Code: _____

Method of Payment: _____ Amount: _____

Signature: _____ Date: _____

Sunnidell would require a minimum \$100 monthly Clubhouse expense to help secure the future interests of our establishment and its wonderful and valued members.

I hereby agree to adhere to the rules and regulations of Sunnidell Golf & Learning Center.