



2019 GOLF MEMBERSHIP APPLICATION

Please fill out and return to:

Houston Oaks Golf Course
555 Houston Oaks Drive
Paris, KY 40361

Full Name: _____ Birth Date: _____

Address: _____

City / State / Zip: _____

Home Phone: (____) ____ - _____ Mobile Phone: (____) ____ - _____

Email Address: _____

Membership Options:

** Prices exclude 6% Kentucky State Tax

- | | |
|---|---------------------|
| <input type="checkbox"/> Seven Day All-Inclusive Membership | \$ 2000 |
| <input type="checkbox"/> Five Day All-Inclusive Membership | \$ 1500 |
| <input type="checkbox"/> Associate Membership | \$ 1500 |
| <input type="checkbox"/> Seven Day Membership* | \$ 1300 |
| <input type="checkbox"/> Five Day Membership* | \$ 1100 |
| <input type="checkbox"/> Range Membership | \$ 350 |
| <input type="checkbox"/> Family Membership | \$ 500 (additional) |

Spouse Full Name: _____

Child #1 Full Name: _____

Child #2 Full Name: _____

* Cart fee not included - \$10 per round (Must be 16 years or older with valid driver's license to rent)

Payment Options:

- Pay in Full (Range Membership and Holiday Special Pricing must pay in full)
- Monthly Payments (Package total must be paid **in full** no later than 12 months after purchase. Packages can be paid off at any time during the 12 months.)

Signature: _____

Date: _____