



Membership Application Form

Last Name (Please Print)	MI	First	
Address	City	State Zip	
Birth Date	Home Phone	Work Phone	Cell Phone
Email	Emergency Contact		Emergency Phone
Employer	Occupation		

Family Members with Access to Facility

(Children up to and including age 23 and live in the same house or attend college as a fulltime student may be included in a family membership)

Spouse	Child/Dependent	Child/Dependent
Age:	Age:	Age:
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female

Payment Details:

(Please check the box (es) for desired annual membership)

Membership Type	Amount	Details / Privileges
<input type="checkbox"/> SINGLE Annual Membership	<input type="checkbox"/> Monthly \$50	<ul style="list-style-type: none"> Free Range Use Cart fee only when playing golf
	<input type="checkbox"/> Annual \$550	<ul style="list-style-type: none"> Free pool use Tennis Court priority
<input type="checkbox"/> FAMILY Annual Membership	<input type="checkbox"/> Monthly \$60	<ul style="list-style-type: none"> Free Range Use Cart fee only when playing golf
	<input type="checkbox"/> Annual \$660	<ul style="list-style-type: none"> Free pool use Tennis Court priority
<input type="checkbox"/> County/School Board Employee Annual Membership (SINGLE)	<input type="checkbox"/> Monthly \$40	<ul style="list-style-type: none"> Free Range Use Cart fee only when playing golf
	<input type="checkbox"/> Annual \$440	<ul style="list-style-type: none"> Free pool use Tennis Court priority

Payment Details Continued:

Membership Type	Amount	Details / Privileges
<input type="checkbox"/> County/School Board Employee Annual Membership (Family)	<input type="checkbox"/> Monthly \$50 <hr/> <input type="checkbox"/> Annual \$550 <hr/>	<ul style="list-style-type: none"> • Free Range Use • Cart fee only when playing golf • Free pool use • Tennis Court priority
<input type="checkbox"/> PRIVATE CARTS	<input type="checkbox"/> \$120.00 Includes membership <hr/> <input type="checkbox"/> \$100.00 Includes membership	<ul style="list-style-type: none"> • Non County/School Board Employee • County/School Board Employee

- **Junior golfers (15 & under) no charge**
- **Unlimited golf with cart \$2,500.00 per year**
- **Green Fees \$25 for 18 holes or \$15 for 9 holes (with cart)**
- **Range Balls \$3.00 per basket**
- **Swimming pool \$5.00 per person (4 hour limit)**
- **If you pay a year in advance, you get one month free**
- **Walking \$10.00 for 9 holes or \$15.00 for 18 holes**
- **Members walk free**
- **Future Tennis court will be free for members**

- EXTRA GOLF FEES (after playing 18 holes)**
- **Members \$6.00 for 9 holes**
 - **Public \$10.00 for 9 holes**
 - **Walkers \$5.00 for 9 holes**
 - **No charge for Members**

Payment Information

Checking (Attach voided check)

VISA / MC / DISCOVER / AMERICAN EXPRESS

Name on Card: _____

_____ - _____ - _____ - _____ Expiration: _____ / _____

Yes, please charge my card

No, please don't use this card

Authorization for Payment of Fees - Electronic Bank Draft or Credit/Debit Card

I authorize Walton County and the financial institution or credit card company named above to deduct the amount of my monthly fee from the account identified above. I understand my automatic payment will be deducted on the 1st day of each month. Changes in bank account or credit card information must be submitted by completing a new Membership application form and filling out the payment information section. Changes must be received by the last day of the month in order to be processed for next month's payment.

Statements will be emailed.

I agree to abide by the following:

I agree to abide by all rules, regulations and bylaws of Walton County Golf & Rec Center. I understand and agree that this membership will begin on the date that this Contract is signed and will run continuously until a cancellation form is filled out and submitted. I understand that this membership will automatically renew for all subsequent years. I also understand that management reserves the right to increase the fees for subsequent membership terms by notifying me in writing 30 days prior to the start of the new membership term at my last known address.

Memberships may be cancelled by completing a Cancellation Form available at Walton County Golf & Rec Center and will be honored under the following terms: Your membership contract will remain valid until a Cancellation Form is completed. If I wish to terminate my membership, I must complete the Cancellation Form and mail to: 171 Country Club Lane, DeFuniak Springs, FL 32435

Waiver/Release

I hereby agree to participate and/or engage in the use of the course, equipment, facilities and programs offered by Walton County upon the understanding and agreement that:

I am aware of the risks of illness or injury inherent in any golf or exercise activity. These injury risks include, but are not limited to: being hit by golf balls, golf clubs, golf carts, or lightning; stepping or tripping in holes or other natural indentations in the ground; injury from insects, animals, birds or snakes, drowning; pulled muscles or other sprains, strains or injuries. I am participating at Walton County Golf & Rec Center upon the express understanding that I hereby indemnify, waive and release Walton County, its employees, agents, officers, Directors, Successors, and Assigns from any and all claims, costs, liabilities, expenses or judgments, including attorney's fees and court costs (hereafter referred to as the "Claims") arising out of my participation and the participation of my family and guests in the program(s) or any illness or injury resulting there from, and hereby agree to indemnify and hold harmless the Walton County BCC from and against any and all such Claims defend, indemnify and hold harmless.

Member Signature:	
Start Date:	Renewal Date: