

NORTH PORT CITY MEMBER PROGRAM
SABAL TRACE GOLF & COUNTRY CLUB

Membership Application
2011/2012

Member Information

Member

Name _____ **City Department** _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ ****E-Mail** _____

I understand that this is a non-transferable membership.

MEMBERSHIP POLICIES

When accepted into membership, I agree to conform to and be bound by the enrollment terms contained herein, the By-Laws, the Rules and Regulations, and written membership policies of the Club (“Membership Documents”) as they may be amended from time to time. I further understand that agreeing to be bound by the Membership Documents is a part of my agreement for membership privileges with the Club. I specifically understand this membership is not divisible.

I hereby acknowledge receipt of a copy of the By-Laws and the Rules and Regulations of the Club.

I ACKNOWLEDGE THE MEMBERSHIP BY-LAWS AND THE RULES AND REGULATIONS PROVIDE THE DETAILS OF THE CLUB’S MEMBERSHIP POLICIES, CONDUCT AND OBLIGATIONS, INCLUDING, BUT NOT LIMITED TO, PROVISIONS IN THE EVENT OF DIVORCE, FOR ARBITRATION OF DISPUTES, RESIGNATION, REDEMPTION OF MEMBERSHIPS, FINANCIAL OBLIGATIONS, DISCIPLINARY ACTION, RELEASE OF LIABILITY FOR PERSONAL INJURY AND THEFT.

I agree the terms and conditions of my/our membership may not be amended in any way by evidence of prior, contemporaneous, or subsequent oral agreements of any kind and acknowledge there are no unwritten oral agreements of any kind.

Member’s Signature _____ **Date** _____