



Gates Four
GOLF AND COUNTRY CLUB

6775 Irongate Drive
Fayetteville, NC 28306

Sales Office Phone: 425-6667

Clubhouse Fax: 425-6661

Golf Pro Shop Phone: 425-2176

Business Office Phone: 295-3437 (Pinehurst)

MEMBERSHIP

APPLICATION

FAMILY INFORMATION:

	Title (Mr, Mrs, Miss, Dr, Rev, Col, Etc.)	Members' Names (First Name, Middle Initial and Last Name, or First Initial, Middle Name and Last Name, as preferred)	Nickname (If any)	Birthday (Month/Day/Year)
Husband				___/___/___
Wife				___/___/___
***** Dependent Children Must Be Under 23 Years Old, Unmarried, and Living At Home or In School. *****				
Dependent Child #1				___/___/___
Dependent Child #2				___/___/___
Dependent Child #3				___/___/___
Dependent Child #4				___/___/___
Dependent Child #5				___/___/___
Dependent Child #6				___/___/___
Home Telephone Number () - (Area Code) + Phone Number	Work Telephone Number () - (Area Code) + Phone Number	Fax Telephone Number () - (Area Code) + Phone Number	Wedding Anniversary ___/___/___	
Home Address (Gates Four Address For Residents)	Street Address or PO Box			
	City, State and Zip Code			
Previous Address (During Past 3 Years)	Street Address or PO Box			
	City, State and Zip Code			
Billing Address (If Different From Home Address Above)	Street Address or PO Box			
	City, State and Zip Code			
E-Mail Address				

OTHER GOLF & COUNTRY CLUB AFFILIATIONS:

	Club Name & Location (City & State)	From (Month & Year)	To (Month & Year)
Club # 1			
Club # 2			

EMPLOYMENT INFORMATION:

Husband's Current Employer	Employer's Name and Location		
	Job Title (or Position)	Length of Service	Employment Verification Contact Name and Telephone Number
Wife's Current Employer	Employer's Name and Location		
	Job Title (or Position)	Length of Service	Employment Verification Contact Name and Telephone Number
Husband's Previous Employer (In Past 3Years)	Employer's Name and Location		
	Job Title (or Position)	Length of Service	Employment Verification Contact Name and Telephone Number
Wife's Previous Employer (In Past 3Years)	Employer's Name and Location		
	Job Title (or Position)	Length of Service	Employment Verification Contact Name and Telephone Number
Husband's Social Security Number		Wife's Social Security Number	Approximate Annual Family Income

CREDIT REFERENCES: (Minimum of 3 Required)

	Company Name	Telephone #	Your Account #
1			
2			
3			
4			

GATES FOUR MEMBERSHIP SPONSORS:

	Member's Name and Address	Member's Signature
Primary Sponsor		
Co-Sponsor #1		
Co-Sponsor #2		

I/We hereby authorize Gates Four Golf and Country Club to contact the employers and references shown above, and gain credit reports for the purpose of seeking further information as deemed necessary by the Club. I/We understand that the Club does not assume any obligation to act upon this application, nor will there be any obligation on my/our part to join if invited.

I/We further agree to abide by the Rules and Regulations of Gates Four Golf and Country Club. In the event the managers of the Club determines that any members of my/our family or guests have violated any of the Club's rules and regulations, I/we may be subject to immediate suspension or permanent loss of privileges at the Club; all in the sole discretion of the Owners and/or Managers of Gates Four Golf and Country Club. I/We further agree that if I/we resign from the Club, I/we will pay all charges, fees and dues associated with my/our Club membership through the end of the year during which we are resigning.

Husband's Signature

Date Signed

Wife's Signature

Date Signed



