



APPLICATION FOR MEMBERSHIP

I, _____ hereby request membership to the Wichita Falls Country Club
this _____ day of _____ 20____ and promise to abide by all rules and regulations of this Club.

Check membership type desired:

- ☐ Stock (Equity Golf) ☐ Junior (oldest must be under age 40) ☐ Super Junior (ages 21-32 years) ☐ Clubhouse
☐ Equity 24 ☐ Junior 24 (oldest must be under age 40) ☐ Clubhouse24 ☐ RacquetSports24
☐ Non-Residential Golf ☐ Non-Residential Social
Military: Yes or No | Corporate Membership: Yes or No
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All applicants must be sponsored by a Stock Holding member and endorsed by two other members in good standing.

Sponsoring Member _____ Member # _____
Endorsed/ Referred By _____ Member # _____
Endorsed/ Referred By _____ Member # _____

The Membership Committee and the Board of Governors must approve all prospective members.

Acknowledgement

- I understand that upon applying to and receiving membership from the Wichita Falls Country Club, all fees are to be submitted with the application to the membership of the Wichita Falls Country Club.
- If, for any reason, I choose to resign my membership, I understand and agree to pay all outstanding fees in full.
- I understand that in addition to monthly dues, I am bound to a monthly Capital Fee of \$66.67, and a Bi-Yearly Member Services Fee (Introductory Memberships), both of which were included in my advertised membership cost.
- I agree that this contract is for a **12-month term** for **Stock, Junior, Super Junior, and Clubhouse memberships**, and a **24-month term** for all **introductory memberships**, including **Equity24, Clubhouse24, Junior24, and Racquet24**. If I choose to resign before the contract term has expired, I understand that I must give written notice of resignation and will remain responsible for **all remaining monthly dues and any applicable fees** under this contract.
- The WFCC will not tolerate any behavior by any individual on the premises of the WFCC that is considered inappropriate, abusive, or threatening towards another person, their property, or the property of the WFCC. Such behavior will be regarded as a violation of these Rules and Regulations and/or the Bylaws of the WFCC. Appropriate action, as defined within the Bylaws, Article V, Section X through XII, will be followed.
- I understand that the Racquet24 membership provides usage privileges exclusively at the Racquet Club. To access any additional Club amenities, I must elect a different membership category. If I do not elect another membership category, I understand my membership number will restrict access to all areas beyond Racquets and will not allow Food & Beverage, Golf, Pool, or Fitness usage. If usage is incurred, a \$50 fee will be assessed each time.
- Violating club membership policy will be subject to disciplinary action by the Board of Governors, which could result in termination of membership.

PERSONAL DATA

Full Name		SSN	
E-Mail		D/L #	
Birthdate		Home Address	
City & State		Zip code	
Cell Phone		Work Phone	
Spouse's Name		Anniversary	
Spouse's E-Mail		Home Phone	
Spouse's Birthdate		Mobile Phone	

Business or Profession		Business Phone	
Company Name		Position	
Company Address		City, State, Zip	

UNMARRIED CHILDREN LIVING IN THE HOUSEHOLD UNDER 21 YEARS OF AGE AND FULL-TIME STUDENTS OR ACTIVE DUTY MILITARY UNDER THE AGE OF 25 QUALIFY AS MEMBERS OF "IMMEDIATE FAMILY"

Name	Date of Birth	Current Age	Sex	Comments

ADDITIONAL MEMBER OPTIONS at RACQUETS

☐ Half Locker _____ Cost ____\$10 Monthly

PAYMENT

I authorize the Wichita Falls Country Club to initiate debit entries to the following bank account or credit card for payment of my monthly statement. I understand that I will receive my monthly statement via the method I choose and that I am responsible for reviewing my statement for accuracy and immediately reporting any errors or corrections to the administration office. The amount debited from my designated bank account will be for the balance due each month. I further understand that in the event my bank account or credit card has insufficient funds or limit restrictions to cover the monthly payment amount, rejection due to account closed status or other account changes, a \$40 fee will be assessed and debited from my bank account or credit card in addition to the monthly payment due. Credit cards are subject to a 3% convenience fee. It is my duty to notify the administration office at the Wichita Falls Country Club by the 1st of each month of any changes to my designated bank account or credit account to avoid automatic debit disruptions.

BANK ACCOUNT INFORMATION

BANK NAME	NAME ON ACCOUNT	ROUTING #	ACCOUNT #	ACCOUNT TYPE
				Checking [] Savings []

CREDIT CARD INFORMATION

NAME ON CARD	ACCOUNT #

EXPIRATION	CC ZIP CODE	CVV #	CARD TYPE
			MC [] Visa [] AE [] Other []

I attest that the information contained herein is true and correct, and give my permission to debit these accounts.

Name _____ Signed _____ Date _____

CLUB USE ONLY

Date received _____ Date Posted _____ Approved/Declined by Membership _____

Ratified by BOG _____ Member # _____

Monthly Statement sent to: ☐ Home ☐ Business ☐ E-Mail

Other Correspondence sent to: ☐ Home ☐ Business ☐ E-Mail

Initiation Fee	\$ _____	Tax	\$ _____
Stock	\$ _____	Total Monthly Dues	\$ _____
1 st Month Dues	\$ _____	Payment Rcvd.	\$ _____
Additional Fees	\$ _____	BALANCE DUE	\$ _____
Subtotal	\$ _____		

NOTES: