MEMBERSHIP APPLICATION



ST. PETERSBURG COUNTRY CLUB

ESTABLISHED 1924

ST. PETERSBURG COUNTRY CLUB

2000 Country Club Way S. St. Petersburg, Florida 33712

	AF	PPLICANT INFORMAT	ION	
□ Dr.	□ Мі	r.	□ Mrs.	
Name:		Date of Birth:		
Primary Residence:	 	City		
				Zip
Secondary Residence	Street	City	State	Zip
Home Phone: ()		Cell Phone: ()	Other: <u>(</u>)
E-Mail:				
	Driver's License #:			
Company Name:	Type of Business:			
	Length of employment:			
Business Address:				
S	street	City	State	Zip
Business Phone: ())	Business	s Fax: ()	
□ Dr.	S □ Mi	SPOUSE INFORMATIO	N □ Mrs.	□ M s
Name:	L IVII	Date of Birth:		
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Primary Residence: _	Street	City	State	Zip
Secondary Residence	e: Street	City S	State	Zip
Home Phone: ()		Cell Phone: (_		
E-Mail:				
Social Security #:		Driver's	s License #:	
Company Name:	Type of Business:			
		Length of employment:		
Title:				
Title: Business Address:			State	

			Birthdate	Male	Female
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2				_ 🗆	
3		· · · · · · · · · · · · · · · · · · ·		_ 🗆	
		CLUB AFFILIAT	TIONS		
Club Name		City	Len	gth of Men	nbership
					
	ear about St. Pete				
low did you h	ear about St. Pete				
How did you h	ear about St. Pete	rsburg Country (Club:		
How did you h	ear about St. Pete	rsburg Country (
Primary Spons	ear about St. Pete	rsburg Country (Club:		
Primary Spons Has know appli	ear about St. Pete	ears through □ bu	Club:		
Primary Spons Has know appli	ear about St. Pete	ears through □ bu	Club: siness □ social or □		
Primary Spons Has know appli	ear about St. Pete	ears through □ bu	club: siness □ social or □ Add	other ress	
Primary Spons Has know appli	ear about St. Pete	ears through □ bu	Club: siness □ social or □	other ress	
Primary Spons Has know appli Other Personal	ear about St. Pete	ears through □ bu	Siness □ social or □ Add Years H	other ress <nown< td=""><td></td></nown<>	
Primary Spons Has know appli Other Personal	ear about St. Pete	ears through □ bu	Siness □ social or □ Add Years H	other ress	

	ourg Country Club, and herewith submit payment enting full, non-refundable, initiation fee for the is application.
ALL MEMBERS ARE REQUIRED TO	HAVE A VALID CREDIT CARD ON FILE
payment received after the 30 th of the month member's responsibility to make payments i	n full monthly by check, cash or card to keep the suspension. Automatic payment options are preferences with the SPCC office and keep
	Club to charge my credit card account if my club h: Credit card payments incur a processing fee.
Type of Card:	Card #:
Expiration Date:	Security Code:
Cardholder's Signature:	
All family memberships are extended to to years of age living at home. Membership categories of membership, initiation, and Florida state sales tax will apply to all costs.	the spouse and dependent children under 25 must be in the name of the senior spouse. All dues are subject to change without notice. sts. Please note that intermediate or junior when aging into the following membership
of all outstanding monies owed to the clu	ncelled with 30 days written notice and payment b including dues and last charges. Once this final unt may be closed. Initiation fees are non-
If I am elected to membership at St. Peter members of my family, will conform to the	emitted to the Board of Governors for approval. ersburg Country Club, I agree that I, and the e By-Laws and Rules of the Club, and comply as currently in effect and as may be modified
Applicant's Signature:	
Spouse's Signature:	
Date Submitted:	