



2275 Hickory Avenue · Mt. Pleasant, IA 52641 · Phone: (319) 986-6157

**Student Membership (under 18)**

Parent is required to be a social member.

Parent's Last Name \_\_\_\_\_ Parent's First Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Parent's Place of Employment \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's Name \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_

By signing this form you (parent) are assuming responsibility for all charges, costs and other miscellaneous fees as a result of the student's membership including club charges, cart, and course damage.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Golfing Signature \_\_\_\_\_ Date \_\_\_\_\_

**Cost of Membership**

Social membership for parents	\$ 60.00
Student membership	215.00
Tax	<u>19.25</u>
Total	\$294.25

All student memberships are subject to Board approval and payment in full is required with this form. **Parents fill out the reverse side of this form.**

Office Use:
Member #: _____
Payment Method: _____
Board Approval: _____
Date Canceled: _____



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## SOCIAL MEMBERSHIP APPLICATION

(Club Fiscal Year Starts 10/1 and Ends 9/30)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Employer \_\_\_\_\_ DOB \_\_\_\_\_

Spouse's Name \_\_\_\_\_

***Social Membership Dues are \$60 plus tax (\$64.20) for the fiscal year  
October 1 through September 30.***

Social Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed form with check to:      MPG&CC  
2275 Hickory Avenue  
Mt. Pleasant, IA 52641

Office Use:
Member #: _____
Board Approval: _____
Date Canceled: _____