



## APPLICATION FOR MEMBERSHIP



# CHARTIERS COUNTRY CLUB

601 BALDWIN ROAD, PITTSBURGH PA 15205 • PHONE (412) 921-3780

Date \_\_\_\_\_

A COPY OF THE CLUB'S BY-LAWS IS  
AVAILABLE UPON REQUEST

TO THE BOARD OF DIRECTORS:

DIRECTORS:

I hereby make application for \_\_\_\_\_ Membership in the Chartiers Country Club, and, if elected, agree to be governed by the By-Laws and all rules and regulations of the Club, as well as special decisions by the Board of Directors.

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Residence \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Alternate/Cell Phone Number: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-Mail \_\_\_\_\_

Business Affiliation \_\_\_\_\_ Business Phone Number \_\_\_\_\_

Business Address \_\_\_\_\_ FAX No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Occupation or Position \_\_\_\_\_

Of what other Clubs are you currently a Member? \_\_\_\_\_

Give names of two (2) other members of the Club known to you and your family excluding the Proposer and Endorser \_\_\_\_\_

Give the name of your Bank or another Firm with whom you have established credit \_\_\_\_\_

Marital Status \_\_\_\_\_ If applicable, Spouse's Name \_\_\_\_\_

Names and ages of children \_\_\_\_\_

Have you ever been a member of this club before  YES  NO

If YES, Type of membership \_\_\_\_\_ Date of resignation \_\_\_\_\_

How long have you resided in Pittsburgh? \_\_\_\_\_

If less than two years, give previous address \_\_\_\_\_

Clubs of which you have previously been a member \_\_\_\_\_

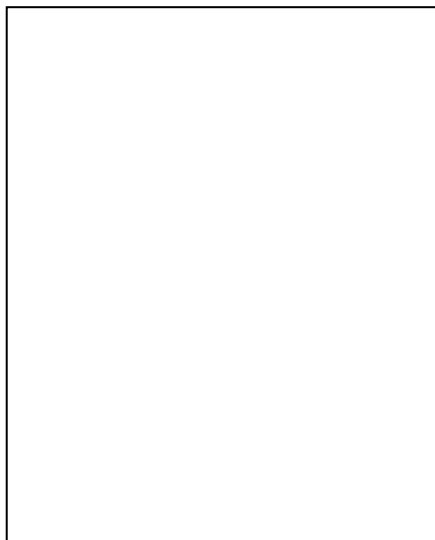
Check your mailing address desired for: Statements:  RESIDENCE  BUSINESS Social Notices:  RESIDENCE  BUSINESS

I HEREBY APPLY FOR MEMBERSHIP IN ACCORDANCE WITH THE CLUB'S BY-LAWS. I UNDERSTAND THAT A CREDIT CHECK MAY BE CONDUCTED DURING MY APPLICATION PROCESS TO EVALUATE MY CREDIT WORTHINESS. I AGREE, IF ELECTED, TO BE GOVERNED BY THE CLUB'S BY-LAWS, POLICIES AND OTHER SPECIAL DECISIONS OF THE BOARD, TO FULFILL ALL FINANCIAL OBLIGATIONS AND I MAKE THIS APPLICATION WITH THE INTENT TO BE BOUND.

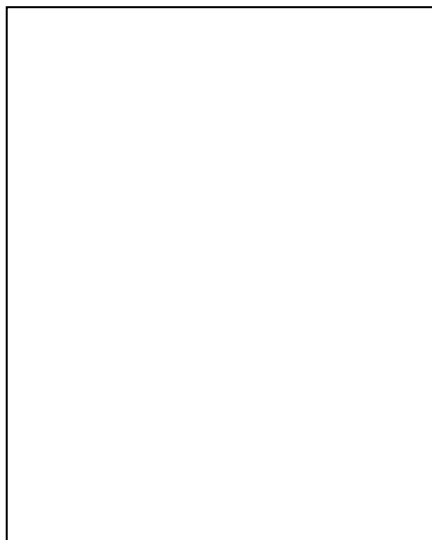
APPLICANT'S SIGNATURE \_\_\_\_\_

PLEASE SUBMIT APPLICATION WITH TWO (2) PHOTOGRAPHS AS SHOWN.

DO NOT ATTACH PHOTOS



(Member)



(Spouse, if applicable)

For the Purposes of any recruitment incentives, the Chartiers Member who referred me is \_\_\_\_\_

Signature of Proposer: \_\_\_\_\_  
(Must be Permanent Golf Member)

Signature of Endorser: \_\_\_\_\_  
(Must be Permanent Golf Member)

Proposer: \_\_\_\_\_  
(Please Print)

Endorser: \_\_\_\_\_  
(Please Print)

ON BEHALF OF THE MEMBERSHIP COMMITTEE,  
I RECOMMEND THIS APPLICATION FOR MEMBERSHIP:

\_\_\_\_\_  
Membership Committee

\_\_\_\_\_  
(Please Print)

THIS APPLICATION HAS BEEN ACCEPTED AND APPROVED  
BY BOARD OF DIRECTORS IN ACCORDANCE WITH THE  
BY-LAWS AND POLICIES OF THE CLUB:

\_\_\_\_\_  
President

\_\_\_\_\_  
(Please Print)

FOR OFFICE USE ONLY

Initiation Fee Paid: \_\_\_\_\_ Certificate Number (if applicable): \_\_\_\_\_

Date Approved BOD: \_\_\_\_\_ Previous Certificate Holder: \_\_\_\_\_

Member Number Assigned: \_\_\_\_\_ Orientation Completed: \_\_\_\_\_

MEMBER INFORMATION

Spouse Information:

Spouse Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Fax: \_\_\_\_\_ Home E-Mail: \_\_\_\_\_

Interests and Activities: \_\_\_\_\_

Wedding Anniversary Date: \_\_\_\_\_

Business Name & Position Held: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Children information: (required for Children to have Club privileges of any type)

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Interest & Activities \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Interest & Activites \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Interest & Activites \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Interest & Activities \_\_\_\_\_

**\* This information is for Chartiers Country Club use only.\***