



THE COUNTRY CLUB OF LEXINGTON

1066 Barr Road, Lexington, SC 29072

2017 POOL MEMBERSHIP APPLICATION

Membership applies Friday before Memorial Day through Labor Day

Date Received _____ Time Received _____

Membership Number # _____

\$600 Membership Fee must accompany application to be considered

To the Board of Directors of the Country Club of Lexington:

I hereby make application for a social membership, as described on the reverse side of this application, in the Country Club of Lexington. I agree to abide by the Constitution, By-laws, Rules and Policies of said Club and all subsequent amendments, additions and alterations that may be made thereto.

PRINT OR TYPE ALL INFORMATION – both sides

MEMBER'S INFORMATION

MEMBER'S FULL NAME _____ Preferred name (i.e. nickname) _____

Date of Birth _____

Home telephone number _____ Cell/Mobile telephone number _____

Home Physical Address _____

Mailing Address (if different) _____

Email address

Occupation/Job title _____ No. of years with Business _____

Business Name _____

Business Address _____

Business telephone number _____ Fax _____

Previous Employer _____

Credit Reference (personal Bank and Location) _____

Have you been convicted of, pleaded guilty, or no contest to, or been convicted of any misdemeanor or felony? (Exclude minor traffic violations). (Circle one): **YES** **NO** If Yes, please explain. (Will not necessarily exclude you from consideration) _____

► **SIGNATURE** (Applicant) _____ Date _____

SPOUSE'S INFORMATION

SPOUSE'S FULL NAME _____ Spouse's Preferred name (i.e. nickname) _____

Date of Birth _____

Occupation/Job title _____ No. of years with Business _____

Business Name _____

Business Address _____

Business telephone number _____ Cell/Mobile telephone number _____

Email address

Previous Employer _____

Have you been convicted of, pleaded guilty, or no contest to, or been convicted of any misdemeanor or felony? (Exclude minor traffic violations.) (Circle one): **YES** **NO** If Yes, please explain. (Will not necessarily exclude you from consideration) _____

► **SIGNATURE** (Spouse) _____ Date _____

Endorsed By _____ Date _____

Endorsed By _____ Date _____

Print Names

Signatures

Comments of Applicant, Sponsor and Endorsers: _____

Only COMPLETED applications will be considered by the Board of Directors (including signatures of applicant, spouse (if applicable) and Proposed/Endorsed by). Per CCL By-laws, applications require signatures of two (2) active members. If necessary, an interview with the Membership Committee may be requested in lieu of signatures. Committee members would meet the signature requirements if application passes through committee for consideration by the Board of Directors.

All information on this form is **STRICTLY CONFIDENTIAL** . . . to be used by **The Country Club of Lexington – ONLY!**

FAMILY INFORMATION

Please list the names of all your **dependent children**; (A dependent child, as defined in CCL ByLaws, is *unmarried sons and daughters less than Twenty-one (21)* years of age and residing at home, or to age Twenty-five (25) if attending school or college full time.*)

FULL NAME (<i>Nickname</i>)	DATE OF BIRTH	INTEREST
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

IN CASE OF AN EMERGENCY, PLEASE NOTIFY (*list name and phone number*) _____

ADDITIONAL INFORMATION - This section is optional and we appreciate your input by completing the following. Thank you.

Please circle which club activities you and your family have an interest in participating.

Pool	Member	Spouse	Children
Swim lessons (<i>children</i>)			Children
Swim team (<i>participant or parent committee</i>)	Member	Spouse	Children
Dining for lunch or dinner	Member	Spouse	Children
Social functions (<i>Holidays/Special Occasions</i>)	Member	Spouse	Children

Please list any additional information you would like noted on your records.

CCL POOL MEMBERSHIP DESCRIPTION

- **This pool membership includes privileges at the CCL pool and dining in clubhouse from Friday before Memorial Day through Labor Day.**
- This pool membership does not have charging, golf, practice facilities, tennis or reciprocal privileges.
- CCL Pool Membership Card must accompany member at all times while at CCL. (*Cards are only issued to the member, and if applicable the member's spouse. Children old enough to be at pool unattended must have their parent's card on hand. In the absence of a parent, permission may be given to a caregiver to bring the member's children to pool but must have written permission along with the member's card to provide at check-in. No guest fee will be required of the caregiver when in the member's absence.*)
- Sign-in and payment of guest fees required when enter pool area.
- The membership fee must accompany this membership application and does not guarantee approval, as memberships are limited. If limit is reached prior to receipt of this application, the fee payment will be voided and returned to applicant. However, the CCL Board of Directors reserves the right to increase, or decrease, the limit as deemed necessary.
- CCL Board of Director reserve the right to deny an applicant, and/or terminate membership based on, but not limited to, submission of false information, inappropriate behavior, and/or any disregard for CCL By-laws and polices (available on website under Members' tab). No refund for termination of membership, by the member or the club.
- ***The Pool Membership has no voting privileges.***

Please make sure both sides are complete. Thank You.