Moorpark
COUNTRY CLUB

Membership Applied For
(select one)
☐ Family Membership ☐ Individual Membership

(select one)
☐ Full Membership ☐ Weekday Membership ☐ Social Membership
☐ Multiple Club Membership ☐ Corporate Membership ☐ Corporate Additional Designee Membership

Personal Information

Name _____

Primary Residence _____
Street City State Zip Code

Home Telephone Number _____ Social Security Number _____

Date of Birth _____ E-mail Address _____

Spouse's Name _____ Date of Birth _____

Social Security Number _____ Anniversary Date _____

Children

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Business Information

Employer _____ Length of Employment _____

Title _____ Business Telephone Number _____

Business Address _____
Street City State Zip Code

Spouse's Employer _____ Length of Employment _____

Title _____ Business Telephone Number _____

Business Address _____
Street City State Zip Code

Please send all Club correspondence to my ☐ Home Address ☐ Business Address

Social References

Name of Club/Organization _____ Year Accepted _____

Address _____
Street City State Zip Code

Telephone Number _____ ☐ Present Member ☐ Former Member

Name of Club/Organization _____ Year Accepted _____

Address _____
Street City State Zip Code

Telephone Number _____ ☐ Present Member ☐ Former Member

Personal References

Name _____ Telephone Number _____ Years Known _____

Address _____
Street City State Zip Code

Name _____ Telephone Number _____ Years Known _____

Address _____
Street City State Zip Code

Credit Check Authorization

I hereby authorize the Club to obtain credit check and/or credit reports from any source in order to assist in evaluating my application for membership.

Please initial for authorization to obtain credit check_____

Payment of Dues, Fees and Charges

I agree to pay all dues, fees and charges billed to my account.
I agree to maintain a current credit card account on file with the Club at all times. Should my account become delinquent , I agree the Club shall have the right to bill such past-due amount to my credit card.

Card Type _____ Account Number _____ Expiration Date _____

I herewith release, hold harmless and indemnify Moorpark Country Club, its officers, members and employees of all liability in conjunction with the processing of this membership application.

I hereby make application for membership in Moorpark Country Club and certify that all of the information submitted herein is complete and accurate. If, at any time, it has been determined that this application has been answered falsely, it shall constitute reason for non-acceptance and/or expulsion from the Club. I understand that this information will be used solely for the purpose of assisting the Club in selecting suitable members as openings occur and will be held in a confidential manner.

Printed Name _____ **Signature** _____ **Date** _____

Spouse's Printed Name _____ **Signature** _____ **Date** _____