



Membership Application

Please complete all information below and make check payable to LeRoy Country Club. Contact the Pro Shop for questions by phone at 585-768-7330 or by email at proshop@leroycc.com

Mail completed form and check to LeRoy Country Club 7759 East Main Rd LeRoy, NY 14482

All membership dues must be paid in full by May 1, 2024. Please check all that apply:

2024 New First Year Membership Special

\$100 off any regular membership.
New Member Special valid through May 15th
Questions- call the Pro Shop at 585-768-7330.

Member(s) agree to accept the terms and conditions of this application:

- To recognize proper etiquette and dress codes while on the premises.
- To pay applicable membership fees in full.
- To assume financial responsibility for reckless and/or intentional damage raised as a result of his/her conduct and shall hold harmless the LeRoy Country Club for any and all damage or injury resulting from his/her actions.

Memberships

- | | | |
|--------------------------|---|-----------|
| <input type="checkbox"/> | Single Weekday Only (Walking) | \$ 600.00 |
| <input type="checkbox"/> | Single Any Day (Walking) | \$ 750.00 |
| <input type="checkbox"/> | Single Under 30 | \$ 500.00 |
| <input type="checkbox"/> | Single Senior (65+) | \$ 500.00 |
| <input type="checkbox"/> | Family Any Day | \$ 850.00 |
| <input type="checkbox"/> | Family Senior (60+) Any Day | \$ 700.00 |
| <input type="checkbox"/> | College Student | \$ 400.00 |
| <input type="checkbox"/> | Junior (under 18 yrs old) | \$ 275.00 |
| | | |
| <input type="checkbox"/> | Single Cart Plan (\$600 + tax) | \$ 648.00 |
| <input type="checkbox"/> | Family Cart Plan (\$700 + tax)
(1 cart and 2 riders) | \$ 550.00 |
| <input type="checkbox"/> | GHIN Handicaps | \$ 20.00 |

TOTAL DUE BY MAY 1, 2024 \$ _____

x _____
Signed

Date _____

Last Name _____

First Name _____

Address _____

City _____

State _____ Zip _____

Phone (_____) _____

Work (_____) _____

Email _____