

MADERA GOLF & COUNTRY CLUB

Social Membership Application



Applicant's Name : _____

Spouse's Name : _____

Home Address : _____

Spouse's Email: _____

Billing Address : _____

Email Address (Menu) : _____

Contact Phone : _____

Cell Phone : _____

Social Membership For Dining ONLY

Please complete and return with check to the office

**YEARLY DUES OF \$30.00
TO BE PAID IN ADVANCE**

Social Member's Printed Name

Date

Social Member's Signed Name

**Memberships are valid for one (1) year from date of application and
can be renewed annually**