



# TIMBERLAKE COUNTRY CLUB, INC.

P. O. Box 321 - Chapin, SC 29036 - [www.timberlakecountryclub.com](http://www.timberlakecountryclub.com) – 803-345-9909

## GOLF/SOCIAL MEMBERSHIP APPLICATION

Membership Number \_\_\_\_\_

Activation Date \_\_\_\_\_

Type of Membership Requested:

\_\_\_\_\_ Equity Golf

\_\_\_\_\_ Equity Social

\_\_\_\_\_ Limited-Play Equity Golf Status (LEG) \*

\* See membership agreement for details concerning requirements for these types of memberships

### APPLICANT INFORMATION: (PLEASE PRINT)

Full Name (Mr/Mrs/Ms) \_\_\_\_\_

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

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Address (Billing address if different from above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

Dependents under 23 living at home or in college:

Name \_\_\_\_\_

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

Name \_\_\_\_\_

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

Name \_\_\_\_\_

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

I understand, and agree to abide by, the rules and regulations of Timberlake Country Club, Inc. and enclose the appropriate fees for the category of membership to which I am applying. Membership costs are per household. I understand that this application is subject to approval and acknowledge that, in the event that it is declined, TCC, Inc. is not obliged to justify its decision.

Applicants Signature \_\_\_\_\_

Date \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_