



Young Adult Membership 2023

<u>Membership Category</u>	<u>Annual Dues</u>
Under 23	\$300
Age 23 to 35	\$600
Age 36 to 39	\$850

* This membership includes unlimited golfing privileges for household family members listed on application.

After 4 pm Membership 2023

<u>Membership Category</u>	<u>Annual Dues</u>
After 4 pm Membership	\$400

* This membership includes golfing privileges after 4 pm for household family members listed on application.

** GHIN Account is not included but can be purchased separately at Pro Shop for \$22 per Member.

Adult Membership 2023

<u>Membership Category</u>	<u>Annual Dues</u>
Single (Over 40)	\$1,200
Family (Over 40)	\$1,400

* Dependent Child(ren) under age of 18 included under a family membership.

Senior Membership 2023

<u>Membership Category</u>	<u>Annual Dues</u>
Single (Age 80+)	\$300
Family (Age 80+)	\$500

* First year is free if you have been a member for 20+ years.

Flex Membership 2023

<u>Membership Category</u>	<u>Annual Dues</u>
Single (Over 40)	\$800
Family (Over 40)	\$1,000

* This membership includes unlimited golfing privileges Monday - Thursday.

*Age is determined **as of January 1st**

**All Membership categories are eligible to play in Elkdale tournaments, however; if tournament is outside their membership playing times you will need to pay greens fees to participate.



2023 Member Application

Please indicate Membership Category: _____ Annual Cost: _____

Member Name: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

Phone Number : _____

Email: _____

Please provide the following information for household family members/dependents:

<u>Name</u>	<u>Date of Birth</u>
1.) _____	_____
2.) _____	_____
3.) _____	_____
4.) _____	_____

Payment Information

Elkdale Country Club will accept payment in the form of cash, check or credit card. Please make all checks payable to Elkdale Country Club.

Payment Method: Cash Check Credit Card

Credit Card Information:

Account Number: _____ Expiration Date: _____

Cardholder Name: _____ CSV Code: _____

Signature: _____

Mail Address: P.O Box 544 Salamanca, NY 14779.

Email Address: janice.elkdale@gmail.com OR dennyelkdale@gmail.com