

**Pine Hills Country Club
Membership Application**

Date _____

Name _____

Address _____

City _____ SS# _____

Phone _____ Work _____

Email address _____

Monthly invoice to be sent by mail or email (please circle one)

Spouse's Name _____

Employed by _____

Occupation _____

Children's Name & Ages:

1. _____ 3. _____

2. _____ 4. _____

Signature _____

Type of membership:

_____ Full includes golf, swimming pool, clubhouse, & 19th Hole 90.00 + tax

_____ Social includes swimming pool, clubhouse, & 19th Hole 50.00 + tax

Starting Date _____ Payment _____

Sponsoring Member _____

Club Manager _____

Please call 318-371-2148 if you have any questions.