



# Recreational Membership Form

\_\_\_\_\_  
 Last Name (Please Print) MI First

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

\_\_\_\_\_  
 Birth Date Home Phone Work Phone Cell Phone

\_\_\_\_\_  
 Email Emergency Contact Emergency Phone

\_\_\_\_\_  
 Employer Occupation

**----- Family Members with Access to Club Facility -----**

(Children up to and including age 18 and live in the same house or attend college as a fulltime student to be included in a family membership)

\_\_\_\_\_  
 Spouse Child/Dependent Child/Dependent

\_\_\_\_\_  
 Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female

\_\_\_\_\_  
 Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female

\_\_\_\_\_  
 Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female

**Membership & Payment Details:**

Membership Type	Amount	Details / Privileges
<input type="checkbox"/> <b>SINGLE</b> Annual Social Membership	<input type="checkbox"/> Monthly \$65	<ul style="list-style-type: none"> <li>Access to the recreational center &amp; restaurant</li> <li>Access to the pool &amp; fitness room</li> <li>20% Discount on Warrior products</li> <li>10% Discount on food/ beverages (excluding alcohol)</li> </ul>
	<input type="checkbox"/> Annual \$780	
<input type="checkbox"/> <b>SINGLE (Non-resident)</b> Annual Social Membership	<input type="checkbox"/> Monthly \$80	<ul style="list-style-type: none"> <li>Access to the recreational center &amp; restaurant</li> <li>Access to the pool &amp; fitness room</li> <li>20% Discount on Warrior products</li> <li>10% Discount on food/ beverages (excluding alcohol)</li> </ul>
	<input type="checkbox"/> Annual \$960	
<input type="checkbox"/> <b>FAMILY</b> Annual Social Membership	<input type="checkbox"/> Monthly \$95	<ul style="list-style-type: none"> <li>Access to the recreational center &amp; restaurant</li> <li>Access to the pool &amp; fitness room</li> <li>20% Discount on Warrior products</li> <li>10% Discount on food/ beverages (excluding alcohol)</li> </ul>
	<input type="checkbox"/> Annual \$1,140	
<input type="checkbox"/> <b>FAMILY (Non-resident)</b> Annual Social Membership	<input type="checkbox"/> Monthly \$130	<ul style="list-style-type: none"> <li>Access to the recreational center &amp; restaurant</li> <li>Access to the pool &amp; fitness room</li> <li>20% Discount on Warrior products</li> <li>10% Discount on food/ beverages (excluding alcohol)</li> </ul>
	<input type="checkbox"/> Annual \$1,560	
<input type="checkbox"/> <b>POOL</b> Annual Pass	<input type="checkbox"/> Resident \$450	<ul style="list-style-type: none"> <li>Access to the pool facility for a single person</li> </ul>
	<input type="checkbox"/> Non-Resident \$650	

**Payment Information**

Checking (Attach voided check)

VISA / MC / DISCOVER / AMERICAN EXPRESS

Name on Card: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration: \_\_\_\_ / \_\_\_\_

Yes, please charge my card

No, please don't use this card

**Authorization for Payment of Fees - Electronic Bank Draft or Credit/Debit Card**

I authorize Lakota Canyon Golf Club and the financial institution or credit card company named above to deduct the amount of my monthly fee from the account identified above. I understand my automatic payment will be deducted on the 21<sup>st</sup> day of each month. Changes in bank account or credit card information must be submitted by completing a new Membership application form and filling out the payment information section. Changes must be received by the last day of the month in order to be processed for next month's payment. Cancelling a bank draft or credit card does not cancel a membership. In the event that a bank draft is revoked or an account is closed and new bank or credit card information is not received, the membership will be transferred to the "annual payment" option and the remaining amount due under the terms of the Contract will be owed. Account balances due to the Club shall be payable no later than 30 days following the statement date. If any payment is not received within 90 days of the due date, the applicant hereby authorizes the Club to charge the amount due, plus any applicable fees or penalties, to the credit card listed on the account. Early termination will only be accepted in the event of a member who passes away or a member who has accepted a military assignment out of the area. **A \$30.00 return fee will be charged for each returned bank draft or declined credit card (i.e. Revocations, Closed Accounts, & Non-Sufficient Funds).**

I would like my monthly statements to be:  E-Mailed FREE (Go Green!)  Paper Statements Mailed (\$25 Annual Fee)

**I agree to abide by the following:**

I agree to abide by all rules, regulations and bylaws of Lakota Canyon. I understand and agree that this membership will begin on the date that this Contract is signed and will run continuously until a cancellation form is filled out and submitted. I understand that this membership will automatically renew for all subsequent years. I also understand that management reserves the right to increase the fees for subsequent membership terms by notifying me in writing 30 days prior to the start of the new membership term at my last known address. I further understand that all fees are subject to tax and the initiation fee is a non-transferable, non-refundable fee.

**Memberships may be cancelled by completing a Cancellation Form available at Lakota Canyon Golf Club and will be honored under the following terms:** The membership is for a one-year mandatory period and automatically renews for another one-year period unless a Cancellation Form is completed and received. If a member chooses to cancel their contract before the end of the one-year membership period they will be subject to pay a \$500 early cancellation fee. Your membership contract will remain valid until a Cancellation Form is completed. If I wish to terminate my membership, I must complete the Cancellation Form and mail to: **15 Mason Irvine, CA 92618 or fax to (866) 863-8941 or Email: Membership@WarriorCustomGolf.com**

**Waiver/Release**

I hereby agree to participate and/or engage in the use of the course, equipment, facilities and programs offered by the Club upon the understanding and agreement that:

1. I am aware of the risks of illness or injury inherent in any golf or exercise activity. These injury risks include, but are not limited to: being hit by golf balls, golf clubs, golf carts, or lightning; stepping or tripping in holes or other natural indentations in the ground; injury from insects, animals, birds or snakes, drowning; pulled muscles or other sprains, strains or injuries. I am participating in the Club's programs upon the express understanding that I hereby indemnify, waive and release the Club, its employees, agents, officers, Directors, Successors, and Assigns from any and all claims, costs, liabilities, expenses or judgments, including attorney's fees and court costs (hereafter referred to as the "Claims") arising out of my participation and the participation of my family and guests in the program(s) or any illness or injury resulting there from, and hereby agree to indemnify and hold harmless the Club from and against any and all such Claims defend, indemnify and hold harmless.

<b>Member Signature:</b>		
<b>Start Date:</b>	/	/
<b>Renewal Date:</b>	/	/

Pro Shop Associate: \_\_\_\_\_ Total Amount \$ \_\_\_\_\_