



NAKOMA GOLF CLUB

4145 COUNTRY CLUB ROAD
MADISON, WI 53711

PHONE: 608.238.3141 | WEBSITE: www.nakoma.org

MEMBER APPLICATION

Please complete all requested information on this form. Have your membership sponsor complete their required sections. Once this nomination form has been submitted to the Membership Director, the information will be taken to the Board of Directors for a vote. The Membership Director will notify you once a decision is made.

Membership Type: _____

Membership Dues Option: Annual Monthly

Application Date: _____

NOMINEE PERSONAL INFORMATION

Nominee's Name: _____

Date of Birth: _____

Primary Home Address: _____

City/State/Zip: _____

Primary Phone #: _____

Primary Email Address: _____

Employers Name: _____

Employers Address: _____

City/State/Zip: _____

Business Phone #: _____

Business Email Address: _____

Family Status: Married Domestic Partner
 Single

DEPENDENTS UNDER 23 YEARS OF AGE

Please list unmarried children under 23 years old. All children listed here will be given the privilege of charging to primary member account.

Name: _____

Date of Birth: _____ Male Female

Name: _____

Date of Birth: _____ Male Female

Name: _____

Date of Birth: _____ Male Female

Name: _____

Date of Birth: _____ Male Female

Name: _____

Date of Birth: _____ Male Female

SPOUSE/DOMESTIC PARTNER

Complete if family status is checked Married or Domestic Partner

Spouse's Name: _____

Date of Birth: _____

Primary Home Address: _____

City/State/Zip: _____

Primary Phone #: _____

Primary Email Address: _____

Employers Name: _____

Employers Address: _____

City/State/Zip: _____

Business Phone #: _____

Business Email Address: _____

TELL US ABOUT YOURSELF

What club activities interest you most?

What events would you be interested in attending at the club?

Interests & Hobbies:



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WINTER ADDRESS (IF APPLICABLE)

Winter Address: _____

City/State/Zip: _____

Winter Phone #: _____

GOLF

- Full Play Ages 40-64
- Senior Full Play Age 65+
- Golf Social
- Intermediate Full Play Ages 36-39
- Intermediate Full Play Ages 31-35
- Junior Full Play Ages 23-30
- Non-Resident Full Play

SOCIAL POOL & TENNIS

- Social, Pool & Tennis Ages 36-64
- Senior Social, Pool & Tennis Age 65+
- Intermediate Social, Pool & Tennis Ages 26-35
- Social Pool
- Social Tennis

SOCIAL

- Social Clubhouse
- Senior Social Clubhouse Age 65+
- Non-Resident Social

*All memberships require a one year commitment. Initiation fee applies to all categories

MEMBERSHIP PROMOTION: _____

*Flyer for current promotion will be attached to this agreement

SPONSOR

SPONSOR- A prospective member must be sponsored by an active Nakoma Golf Club member in good standing.

Member Sponsor Name: _____

Member Sponsor #: _____

Relationship to Nominee: _____

How long have you known the Nominee: _____

What are the principal reasons your nominee would make a fine member of Nakoma Golf Club?

REFERENCE

REFERENCE- Should a prospective member not know any current members, the Club Manager shall, at their discretion, sponsor the prospective member with an adequate reference.

Reference Name: _____

Reference Phone #: _____

Reference Email Address: _____

Relationship to reference: _____



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DISCLOSURE & AUTHORIZATION, BYLAWS ACKNOWLEDGEMENT & PHOTOGRAPHY WAIVER

By signing this document, I/we are applying for membership to Nakoma Golf Club.

I do _____ I do not _____ authorize Nakoma Golf Club to contact my current employer for Employment and Reference Verifications.

If my nomination form is approved and accepted by the Board of Directors of Nakoma Golf Club, I agree to be bound by the bylaws, rules and regulations of the club in effect and hereafter adopted. Upon termination of membership for any reason, I/we agree to pay all dues, assessments and outstanding club charges that I/We have or would have incurred through December 31st of that year the terminate notice was received by the Club.

I acknowledge that any photographs taken of myself and family at Nakoma Golf Club may be used for promotional purposes. Uses may include but are not limited to posting photographs on the Nakoma Golf Club website, social media, newsletters, email communications and media boards. Nakoma Golf Club will be the rightful owners of these images.

Signature of Nominee: _____ Date: _____

Signature of Spouse: _____ Date: _____

FOR OFFICE USE ONLY

Approval of Nomination by the Board of Directors
on this ____ day of ____, 20__

Signature of Club Manager: _____

Print Club Manager Name: _____



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SELECT ONE OPTION:

I would like to set up ACH Automatic payments with a bank account.

Select one:

Checking

Savings

Account Number (see sample below): _____

Routing Number (see sample below): _____

Financial Institution: _____



I would like to set up ACH Automatic payments with a bank account.

Card Type:

American Express

Discover

Master Card

Visa

Credit Card Billing Address:

Street _____ City _____ State _____ Zip _____

Account Number : _____

Expiration Date: _____ Security Code (see sample below): _____



Please deduct my statement balance on the 10th of each month from the account/credit card listed above. I understand that my account is not satisfied within 40 days, in compliance with the financial obligations of membership, the credit card listed above will be charged. I also understand a 4% fee is included with all credit card charges.

Member Name: _____

Member #: _____

Signature: _____

Date: _____