

2018-2019 **Smethport Country Club**

First Time (**ONE** Time **ONLY**) Membership Form

PO Box 335 13065 Route 59 Smethport, PA. 16749
814-887-5641 www.smethportcc.com

Members Name: _____

Address : _____

City: _____ State: _____ Zip Code _____

E-Mail address: _____ Phone # _____

Children that would qualify under a family membership:

Name: _____ Birth date: _____ Age: _____

Name: _____ Birth date: _____ Age: _____

**Please check Membership type, extras if desired, for the
April 1, 2018 through April 1, 2019 season:**

Family Membership:

Pay \$ **395.00** **\$ 360.00 off the regular rate.** _____

Single Membership:

Pay \$ **295.00** **\$ 305.00 off the regular rate.** _____

Single Membership with cart use for the season.

Pay \$ **500.00** _____

Club storage \$ 40.00 _____

Locker rental \$ 25.00 _____

Total _____

**This Membership form is for anyone that has not been a Member since 2012.
2013 thru 2017 Ex-Members are not eligible.**

