North Conway Country Club 2025 Associate Membership Application

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Full (Unlimited Play) Individual	Dues \$2310	Capital Fund N/A	Concession Card \$90	Total \$2400
Family	\$4075	N/A N/A	\$180	\$4255
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MidWeek (Anytime N	Mon-Thur, Sund	day and Holidays after	noon)	
Individual	\$1875	N/A	\$90	\$1965
Family	\$3370	N/A	\$180	\$3550
	DUES A	FTER NOVEMBER 3	80 th , 2024	
Full (Unlimited Play)			Concession Card	Total
Individual		N/A	\$90	\$2631
Family	\$4483	N/A	\$180	\$4663
3 ft 1557 1 //		1 1 1.1 6		
MidWeek (Anytime Mon-Thur, Sunday a Individual \$2063				
Family	· ·		\$90 \$180	\$2153 \$3887
			1	1
ame: Name:				
Member Type: Full Midweek Member Type: Full Midweek				
Member Email:		Membe	r Email:	
Member Date of Birth		Membe	r Date of Birth:	
Additional Options		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	120 110 (0000010)	
Locker: □ Large - \$50 Loc	ker Number:			
Club Storage: □ \$125 Per Ba				
Practice Range: ☐ \$125 Per	O			
Handicap System Access:		IN Activation - \$30 pp.	required for participation in (·luh events)
Seasonal Cart: ☐ \$550 Per F				evenes)
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Cart Punch Card: ☐ \$120 fo Total Dues and Option:			Check □ Credit Card]*
Received By: Date:	_			
		Billing Information		
		ction must be filled out in its er	2	
Shoul	d your address chang	ge throughout the season, pleas	e notify the office directly.	
Mailing Address (Street or P	O Box):			
City/Town:		State: Zip:		
Home Phone:				
I IOIIIC I IIOIIC.		Cell Phone:		

Please return to: North Conway Country Club, PO Box 555, North Conway, NH 03860 Questions? Please call 603-356-9391 or email kewalk@pga.com