

North Conway Country Club

2026 Associate Membership Application

| Full (Unlimited Play) | Dues | Capital Fund | Infrastructure Fund | Concession Card | Total |
|-------------------------------------------------------------------|--------|--------------|---------------------|-----------------|--------|
| Individual | \$2060 | \$450 | \$200 | \$90 | \$2800 |
| Family | \$3575 | \$900 | \$400 | \$180 | \$5055 |
| MidWeek (Anytime Mon-Thur, Sunday and Holidays after noon) | | | | | |
| Individual | \$1625 | \$450 | \$200 | \$90 | \$2365 |
| Family | \$2870 | \$900 | \$400 | \$180 | \$4350 |

DUES AFTER NOVEMBER 30th, 2025

| Full (Unlimited Play) | Dues | Capital Fund | Infrastructure Fund | Concession Card | Total |
|-------------------------------------------------------------------|--------|--------------|---------------------|-----------------|--------|
| Individual | \$2266 | \$450 | \$200 | \$90 | \$3006 |
| Family | \$3933 | \$900 | \$400 | \$180 | \$5413 |
| MidWeek (Anytime Mon-Thur, Sunday and Holidays after noon) | | | | | |
| Individual | \$1788 | \$450 | \$200 | \$90 | \$2528 |
| Family | \$3157 | \$900 | \$400 | \$180 | \$4637 |

Name: _____

Name: _____

Member Type: Full _____ Midweek _____

Member Type: Full _____ Midweek _____

Member Email: _____

Member Email: _____

Member Date of Birth: _____

Member Date of Birth: _____

OK TO SHARE YOUR EMAIL WITH THE MEMBERSHIP YES NO (Circle One)

Additional Options

Locker: Large - \$50 Locker Number: _____

Club Storage: \$125 Per Bag

Practice Range: \$125 Per Person

Handicap System Access: One Year GHIN Activation - \$35pp (required for participation in club events)

Seasonal Cart: \$550 Per Person if paid before April 1st (**\$600 after April 1st**).

Cart Punch Card: \$120 for (20) nine hole cart fees

Total Dues and Options: \$ _____: Cash _____ Check _____ Credit Card* _____

Received By: _____ Date: _____

Billing Information

This section must be filled out in its entirety.

Should your address change throughout the season, please notify the office directly.

Mailing Address (Street or PO Box): _____

City/Town: _____ State: _____ Zip: _____

Home Phone: _____ 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