

2024 Doe Valley VIP Golf Membership

Name _____ **Email** _____
Street _____ **Phone** _____
City _____ **Lot #** _____
State _____ **Zip** _____ **Date** _____

Services Provided	Regular	Property Owner	(Circle Choices)
Single Golf Membership	\$102	\$92	
Family Golf Membership	\$129	\$111	
Unlimited Carts - Single	\$40		
Unlimited Carts – Family	\$50		
Private Gas Cart w/ Storage	\$20		
Private Electric cart w/ Storage	\$25		
Cart Trail Fee w/ NO Storage	\$10		
GHIN Handicap Fee	\$35 Adult / \$25 Junior		

**** SALES TAX WILL BE ADDED TO ALL SERVICES ****

Prorate of First Monthly or Total Annual Dues _____

GHIN Fees Total _____

Total DUE / Total PAID TODAY _____

Amount to be Billed 1st Month _____ (Date of 1st Month _____)

Amount to be Billed Subsequent Months _____

Initials

- ✓ I acknowledge that I have received a copy of the Doe Valley Golf Club Rules and I agree to abide by the rules.
- ✓ I understand that I must continue making payments each month for a minimum of 12 months from the date of this agreement, even if I choose to stop playing sooner.
- ✓ I understand that this agreement will automatically renew on May 1st of each year for an additional 12 month season at the same rates unless I advise Doe Valley to terminate my membership or Doe Valley notifies me of their intent to change the agreement. Notice must be given within 30 days prior to any changes.
- ✓ I understand that if I am more than 30 days behind on dues payment, all course privileges will be suspended, all future dues for the season will become due immediately, and a 10% late fee will be added to my balance. The complete balance due must be paid in full to restore my playing privileges.

MEMBER SIGNATURE _____

PRO SHOP SIGNATURE _____