On Cattail Road North of Fulton



P.O. Box 48 Fulton, IL 61252

APPLICATION FOR MEMBERSHIP

	<u>Please Print</u>	Date:
Name:		
Address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	
that this application is subject to	acceptance by the Boa eptance, I will remit my	check for the amount of the Fulton
Please give the name of spouse responsibility to notify the Fulton or you might be bypassed and re	Country Club of any ac	ddress or phone number changes
Fulton Country Club Bond - \$22	5.00 Annual Family Me	embership - \$750.00
Name of Spouse:		
Name of Eligible Children:	(Age)	(Age)
	(Age)	(Age)
Written Signature of Applicant	t	
Recommended by Regular Me	mber	
Recommended by Regular Me	mber	
Accepted By Signature:		Date Accepted:
Please Return Completed Applicat	ion to: Fulton Country P.O. Box 48	

Fulton, IL 61252

Please make a *copy* of this application <u>after the Accepted By Signature & Date are completed</u>. This is your proof that you turned in an application and that it was accepted by the club. An unsigned copy will not be accepted as proof that you have submitted one.