

2022 MEMBERSHIP

CONTACT INFORMATION				
Name:	e: Spouse:			
Child 1:	: Child 2:			
Child 3:	3: Child 4:			
Address:	St			
Phone:	:: Phone:			
E-mail 1:	1: E-mail 2:			

Option

Seasonal Cart, Couple

2022 MEMBER DUES CATEGORY TOTAL **2022 DUES** *\$795* Individual Golf Couple Golf \$1,100 Family Golf (up to 4 people same household) \$1,300 Twilight Golf (after 2pm everyday) \$595 \$495 Student Golfing (full time student up to age 23) Business (foursome per day walking) \$2,250 \$3,750 Business (foursome per day w/carts)

		
18 Hole 10-Play Card	\$330	\$
9 Hole 10-Play Card	\$200	\$
18-Hole 10-ride Cart Card	<i>\$175</i>	\$
9-Hole 10-ride Cart Card	\$120	\$
GHIN Handicap System	\$40	\$
Seasonal Cart, Single	<i>\$750</i>	\$

2022 MEMBER OPTIONS

Cost

Total

Total Amount, Membership and/or Member Options: \$

\$1,250

Total Amount From Front: \$

PAYMENT INFORMATION				
Card #	Exp	CVV Code:		
Billing Address (Street Number):				
Dining Address (Street Admost).		Blilling 2/p		
Please make checks payable to Wilson Lake CO Return completed form with check or credit card information	ı to:			
Wilson Lake Country Club				
320 Weld Road • Wilton, ME • 04294				
(207) 645-2016	Printed			
RELEASE AND WAIVER OF LIABILITY AND INDEM In consideration for being permitted to utilize the facilities, services, and or "Golf Club") for any purpose, including but not limited to observation with the Club, without respect to location, the undersigned, for himself cacknowledges, agrees and considers such premises and facilities or the a observation or use of any facilities or equipment or participation in such facilities and equipment thereon and such affiliated programs have been	programs of Wilson La or use of facilities or e or herself and any pers ffiliated program. It is affiliated program con	ake Country Club (hereinafter referred to as "the Club" quipment, or participation in any program affiliated onal representatives, heirs, and next of kin, hereby further warranted that such entry into the Club for stitutes an acknowledgement that such premises and all		
same as being safe and reasonably suited for the purpose of such observ IN FURTHER CONSIDERTION OF BEING PERMITTED TO ENTER THE CLUB F FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILI. WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, officers, employees, and agents (hereinafter referred to as "releasees") and next of kin for any loss or damage, and any claim or demands therein the undersigned, whether caused by the negligence of the releases or or equipment therein, or participating in any program affiliated with the	ration, use, or participa FOR ANY PURPOSE, ING ATED WITH THE CLUBS FO THE FOLLOWING: DISCHARGES AND CO from all liability to the fore on account of inju	Action. CLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF S, VENANTS NOT TO SUE THE CLUB, their directors, undersigned, his personal representatives, assigns, heirs, any to the person or property or resulting in death of dersigned is in, upon, or about the premises or any facilities		
2. THE UNDERSIGNED HEREBY AGREES TO INDEMN liability, damage, or cost they may incur due to the presence of the unde facilities or equipment of the Club or participating in any program affiliat	rsigned in, upon, or al			
3. THE UNDESIGNED HEREBY ASSUMES FULL RESPO to negligence or releasees or otherwise while in, about, or upon the prer thereon or participating in any program affiliated with the Club.		ISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due or while using the premises or any facilities or equipment		
THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, No permitted by the law of the State of Maine and that if any portion thereough legal force and effect.				
THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AN oral representations, statements, or inducement apart from the foregoin				
I HAVE READ THIS RELEASE AND AGREE TO IT FOR MYSELF	GREE TO THIS RELEASE	FOR MY CHILDREN WHO ARE MINORS		
	//			
/	Date	Member's Signature		
By signing below, I acknowledge that I am a member of the Club and, as membership is non-refundable. I also understand that any member listed the Club to terminate my membership privileges without refund. I also greceive proper medical treatment, unless otherwise noted in writing.	d or my guests who fai	I to follow the established Club policies can be cause fo		

Signature: _____ Staff Signature: _____