



Bay Terrace Country Club Application _____

Parking Permit # _____ Returned: Yes No

ID#1: _____
ID#2: _____

New Renter _____ Returning Renter _____ Shareholder _____

Name of Member #1: _____ D.O.B. _____

Name of Member #2: _____ D.O.B. _____

Street Address: _____

City: _____ State: _____ Zip: _____ How long at this address? _____

Tel Number: Cell# _____ Home# _____

Email: _____ Email #2 _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Name of Children	Date of Birth & Age	Gender	Birth certificate Verified

Nanny: _____ Membership _____

Aide: _____

How did you hear about us? (Please check all that apply)

Newspaper (note publication) _____ Website _____ Friend _____ Other (please explain) _____

Signature _____

Date _____

Pursuant to its Rules & Regulations, Bay Terrace Country Club, Inc. Reserves the right to deny this application.
FEES ARE NON-REFUNDABLE - THERE IS A \$50.00 RETURN CHECK FEE

Total Cost \$ _____ Paid in full\$ _____ Balance Due\$ _____ Check# _____ Entryclubsenry&email _____

Employee initial: _____ Date: _____