



1563 N River Road
Eureka, Ks. 67045
(620) 583-5642
www.eurekacountryclub.com

I/We the undersigned hereby apply for the membership in the Eureka Country Club for the membership type indicated below. If accepted and approved by the Board of Directors, I/We agree to abide by the rules, regulations, and by-laws of the Club. It is also understood by myself that any monthly statement is due and payable by the 20th of each month. If not paid in full by the 20th, I/We will incur a late fee on any unpaid balance.

For the Stockholder Family membership, it is understood that myself, my spouse and all members of my immediate family including students under the age of 23 are entitled to the use of all facilities and privileges offered by the Club, including the right to one vote per membership at the Annual Meeting.

For the Stockholder Single membership, payment of dues and restaurant minimum, it is understood that I alone am entitled to the use of all facilities and privileges offered by the Club, including the right to one vote per membership at the Annual Meeting.

For the Associate Family or Single membership, it is understood that I/We enjoy the same rights and privileges as the Stockholder Family or Single membership, without the right to vote at the Annual Meeting. This membership is for a maximum two-year lifetime period. After two years of Associate membership, the membership must be promoted to a Stockholder membership or be canceled.

For the Social Family or Single membership, it is understood that we enjoy the same rights and privileges as the Stockholder Family or Single membership, without the right to vote at the Annual Meeting nor use of the Golf Course facilities. The Social membership can be advanced to an Associate or Stockholder membership at any time.

For any of the memberships above, I/We agree to pay the dues and minimums as indicated on the second page. My membership will be continued at the monthly rates/timeframe indicated unless CANCELED IN WRITING by myself. I/We understand my membership much be canceled in writing or I/We will be responsible for all charges incurred. Upon termination of membership, should I have an outstanding balance, I/We understand this balance must be paid in full before I/We are released of responsibilities. This includes dues, restaurant minimum and any assessments the Board of Directors deem appropriate.

Stockholder Family - \$120 dues and \$25 restaurant minimum, \$100 Stock (one-time fee - refundable)

Stockholder Single - \$110 dues and \$25 restaurant minimum, \$100 Stock (one-time fee - refundable)

Associate Family- \$105 dues, No restaurant minimum and No Stock purchase.

Associate Single- \$95 dues, No restaurant minimum and No Stock purchase.

Social Family/ Single- \$40 dues and \$30 restaurant minimum, No Stock purchase.

EUREKA COUNTRY CLUB
APPLICATION FOR MEMBERSHIP

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Name: _____ Spouse: _____

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Home address: _____

Signature: _____ Email: _____

Please circle desired membership: Stockholder Family, Stockholder Single, Associate Family, Associate Single, Social

Current rates: Stockholder Family - \$120 dues and \$25 restaurant minimum, \$100 stock (one-time fee – refundable)

Stockholder Single - \$110 dues and \$25 restaurant minimum, \$100 stock (one-time fee – refundable)

Associate Family - \$105 dues, No restaurant minimum and No stock purchase

Associate Single - \$95 dues, No restaurant minimum and No stock purchase

Social Family/Single - \$40 dues, and \$25 restaurant minimum and No stock purchase

The first month's dues and stock (if applicable) are due with this application. Sales tax will be added to the restaurant minimum.

Office use only: Date application was received: _____ Amount Received: _____ Date Approved: _____