



Holston Hills Golf Course

## Membership Application – 2021

Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone \_\_\_\_\_ Birth Date \_\_\_\_\_

Spouse's First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Email Address \_\_\_\_\_

Dependent Children: Must be 21 years old or under of dependent college student

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

\_\_\_\_ ANNUAL\* CHARTER (\$1500 due with application)

\_\_\_\_ MONTHLY CHARTER (\$150 due with application and by the 5<sup>th</sup> of month thereafter)

\_\_\_\_ ANNUAL\* HOLSTON (\$1,000 due with application)

\_\_\_\_ MONTHLY HOLSTON (\$100 due with application and by the 5<sup>th</sup> of month thereafter)

\_\_\_\_ OUT OF STATE\* (\$500 due with application)

*\*annual memberships to automatically renew on April 1<sup>st</sup> unless canceled by March 1<sup>st</sup>*

I hereby make application for Membership in Holston Hills Golf Course and agree to abide by its rules and regulations.

Signed \_\_\_\_\_

Drop off at Holston Hills Golf Course (January 2, 2021 or after) or mail with check to:

Holston Hills Golf Course  
PO Box 1347  
Marion, VA 24354