



2018 Membership Application

Name _____

Address _____

Phone- Home _____ *Cell* _____

E-Mail _____

Current Stockholder - Yes _____ *No* _____

Type of Membership- Single _____ *Student* _____ *Junior* _____

Family _____ (*Add \$50 Per Child Ages 12-23*)

If Family Membership Please add name of Spouse _____

Children _____

Membership Rate \$ _____

Season Pass Cart \$ _____

GHIN Cards @ \$20.00 each \$ _____

Names of GHIN Card

Members _____

Dues	\$ _____	Payment Options	
Season Cart Pass	\$ _____	Cash _____	Check _____
Cart Card 10 Play	\$ _____	MC _____	Visa _____
Sub Total	\$ _____	Card # _____	
6 % Vt. Sale Tax	\$ _____	Exp. Date _____	3 Digits _____
Ghin Card	\$ _____	Make Check Payable to:	
Total	\$ _____	Lake St. Catherine Country Club	
		PO BOX 236 Poultney VT. 05764	