

INDIAN BAYOU GOLF & COUNTRY CLUB
MEMBERSHIP APPLICATION

Date _____

Membership Committee
Indian Bayou Golf & Country Club
P.O. Box 788
Destin, FL 32540
(850) 837-6191
www.IndianBayouGolf.com



Gentlemen:

I hereby make application for a _____

(Type)

membership in your Club, and if elected agree to abide by its Rules & Regulations.

Name (Print) _____

Local Address _____

City, State, Zip _____

Phone No. _____

Northern Address _____

City, State, Zip _____

Email Address _____

(use this for statements yes no)

Marital Status (Spouses First Name) _____

Family Memberships

Children: Name & Birth Date of each.

Merchandise Purchases

Members will receive a 20% discount on purchases in the Golf Shop. This discount applies to MERCHANDISE that is not currently discounted and includes golf balls, caps, gloves, shoes, apparel etc.

MEMBERSHIP FEES: PLEASE ADD 7.0% SALES TAX

Annual Membership

Single.....3,750.00
Couple.....4,500.00
Family.....4,900.00

Corporate Membership

2 Partners / Officials of Firm.....7,000.00
Each Additional, Add.....3,000.00

Semi-Annual Membership (October 1 - March 31)

Single.....1,875.00
Couple.....2,600.00

Quarterly Membership (January 1 - March 31)

Single.....1,050.00
Couple.....1,350.00

Practice Facilities

The practice facilities at Indian Bayou continue to be available to members at no charge.

Signed _____

(Applicant)

Membership fees are non-refundable



Indian Bayou

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Application