THUNDERHART GOLF FREEHOLD	2024 MEN	IBER APP	LICATION	
please print clearly, thank you!			date of birth	
MEMBER NAME:			1 1	
MEMBER NAME:			1 1	
(child) MEMBER NAME:			1 1	
(child) MEMBER NAME:			1 1	
(child) MEMBER NAME:			1 1	
(child) MEMBER NAME:			1 1	
To add additonal children, please copy this form and enter the additional names	s and date of birt	h		
., .,				
ADDRESS:				
EMAIL:				
PHONE:				
MEMBERSHIP TYPE		Early Bird Rate, prior to 3/15/24	Full Rate, after 3/15/2024	AMOUNT PAID
UNLIMITED DRVING RANGE MEMBERSHIP, ages, any		N/A	\$250.00	
JUNIOR, ages 12-18 parents are not members		N/A	\$300.00	
YOUNG ADULT, ages 19-25		N/A	\$650.00	
SINGLE MEMBERSHIP, ages 26-59		\$1,050.00	\$1,100.00	
COUPLES MEMBERSHIP, married or domestic partners		\$1,400.00	\$1,450.00	
SENIOR SINGLE MEMBERSHIP, age 60 +		\$900.00	\$950.00	
SENIOR COUPLE MEMBERSHIP, age 60+ married or domestic partners		\$1,300.00	\$1,350.00	
ADD CHILDREN TO ANY OF THE ABOVE MEMBERSHIPS, \$150.00 per child, 18 and under (except junior and driving range)		N/A	\$150.00	
		TO	OTAL PAYMENT	
signature(s) of primary member & partner, young adult, single, senior or couple	es memberships	& parent/quardia	n of junior member	
SIGNATURE: Date:				
SIGNATURE:			Da	te:
Return completed application, along with payment to:				
Thunderhart Golf Freehold ATTN: Gerri Krasney 497 Mountain View Road Freehold, NY 12431				
Checks made payable to:				
Thunderhart Freehold INC. For Credit Card Payment, call Gerri Krasney 518-634-2268 Ext. 2 or email thunderhartgolfny@gmail.com				
please do not mail or email credit card information!				
FOR OFFICE USE ONLY		1		
Data received:		Member card #		
Date received: Amount:	I	n'		
Payment Type:		Check#:		
Thank you!				