



Membership Application 2021

Please return this completed application with your payment

PLEASE PRINT

NAME (s) _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 WINTER PHONE _____ SUMMER PHONE _____ CELL PHONE _____
 MEMBER EMAIL 1 _____ MEMBER EMAIL 2 _____

DONATE YOUR TIME OR MONEY
 Please check one — We'll contact you!
 Opening Clean Up Tournaments
 Clubhouse Maintenance Gardens
 \$50 Donation

Junior Golf Donation
 (Newport Youth Golf Association)
 Please make separate tax deductible donation
 via check payable to NYGA

***PRICE INCLUDES 6% VERMONT SALES TAX**

Young Adult (19-24)	DOB ___/___/___	(\$283.02+\$16.98 tax)	\$ 300.00*	\$ _____
Young Adult (25-30)	DOB ___/___/___	(\$514.15+\$30.85 tax)	\$ 545.00*	\$ _____
Young Adult (31-35)	DOB ___/___/___	(\$721.70+\$43.30 tax)	\$ 765.00*	\$ _____
Adult 36 & up		(\$850.94+\$51.06 tax)	\$ 902.00*	\$ _____
Adult Couple	>	(\$1679.25+\$100.75tax)	\$ 1780.00*	\$ _____
Gift Card Investment to the Restaurant (\$55 value)		\$50 REQUIRED FEE per adult member	\$ 50.00 ea	\$ _____
Juniors (10-18)	DOB ___/___/___ Name _____		\$ 100.00*	\$ _____

UNDER 10? KIDS PLAY FREE
 w/Adult & KIDS get a Free Bucket of Balls after 2:00 on Sundays w/Adult

Over 80?
 Call Janet: 814-688-9397 802-334-7335 for rate!

Lifetime Membership (62 and over) GHIN not included	\$9,020.00*	\$ _____
GHIN FEE (Optional but needed for tournament and league play)	\$ 25.00*	\$ _____

COMPANY STOCK First-time membership requires a share of stock per person		\$ 25.00	\$ _____
Leased Club Cart (35 available) Single	(\$524.53+31.47 tax)	\$ 556.00*	\$ _____
Leased Club Cart Couple	(\$779.24+46.76 tax)	\$ 826.00*	\$ _____
Cart Storage Gas Space # _____		\$ 420.00	\$ _____
Cart Storage Electric Space # _____		\$ 450.00	\$ _____
Lockers —full year use Medium Locker # _____		\$ 40.00	\$ _____
Lockers —full year use Large Locker # _____	pick one men women	\$ 100.00	\$ _____
Raffle tickets for free membership (on back) _____ @		\$ 10.00 ea	\$ _____

GRAND TOTAL	\$ _____
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PAYMENT OPTIONS:

Please make checks payable to: Newport Country Club Inc.
 Mail form to: Newport Country Club, c/o Ark CPA Inc., 375 East Main Street, Newport, VT 05855
 or
 Pay by Credit Card: _____ - _____ - _____ - _____ EXP ___/___ CVC _____ Amount Authorized \$ _____
 Name on Card _____ Billing Address _____
 Phone Number _____ Signature _____
 Contact the Pro Shop for questions, 802-334-2391

Mail to: Newport Country Club c/o Ark CPA Inc. 375 East Main ST, Newport VT 05855

2021 MEMBERSHIP RAFFLE TICKET

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____