

## Rochester Country Club 2026 MEMBERSHIP APPLICATION

## Membership Rates - INCLUDES GHIN &

\$30 Reciprocal Fee at Nippo (1 per Week & AFTER 12PM Fri-Sun & Holidays)
Non-Cart Members: Cart Fees due for ALL Rounds / Leagues / Events

					<u>Piease F</u>	<u>'ay by I</u>	<u>viarch 15</u>	<u>tn</u>												
Individual Members			\$ 2,400																	
Couples Membership					\$ 4,050															
Couples Membership (1 spouse age 60 or over by April 1st) Senior Single (Age 60 by April 1st) Membership						\$ 3,950 \$ 2,300														
Senior Couples (Age 60 by April 1st) Membership							350 350													
Young Professional (23 to 35 years old by April 1st)							200													
Young Professional Couples Membership Twilight Single - After 2pm Everyday (time subject to change) Child under 18 with Parent Membership (AFTER 2PM ON WEEKENDS) Student (8 to 17 years old & AFTER 2PM ON WEEKENDS)							\$ 3,450 \$ 1,900 \$ 400 \$ 500													
										Student (18 to 22 years old attending school)							\$ 1,450			
										Yearly Cart Membership Rate Single Person ½ Cart					\$ 1,000					
Couples Ful Bag Storage \$100 / Pull Cart Storage \$60 / Both \$150					• •															
Bag Storage \$100	Pull Cart	Storage \$60	/ Botn	\$150		\$ '	100 / \$ 60	) / \$150												
		Appli	cation F	orm – PLEASE	PRINT															
Member Name						Date of Birth:														
Spouse's/ Partner's N	ame					Date of Birth:														
Child's Name						Date o	of Birth:													
Child's Name						Date o	of Birth:													
Mailing Address																				
Winter Address																				
Phone Number		Home			Cell															
Additional Cell number	er	Name			Cell															
Email Address:					(I	PLEASE	PRINT LE	EGIBLY)												
Email Address:					(	PLEASE	PRING LI	EGIBLY)												
Type of Membership					Amou	ınt		\$												
		Yearly Cart Membership (If applicable)						\$												
Locker Rental								\$												
Bag / Pull Cart Storag	е							\$												
McDonough Scholars	hip <u>Sugges</u>	<u>ted</u> Donation \$	\$10.00 / p	erson				\$												
Total Amount Due								\$												
Method of Payment	Check #		_																	
Credit Card Type	Visa	Mastercard	AME																	
Credit Card #			Exp. Da	ite	V-Code		Billina Zi	in Code												