

2022 Resident Membership Application (One Applicant per Form Please)

Applicant _____ Member #: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Cell Phone: _____ Email: _____

Dennis Property Address*: _____

RESIDENT MEMBERSHIP CATEGORIES (please select one) ***SUBJECT TO AGE VERIFICATION**

VERIFICATION FORMS ACCEPTED
 - Most Recent Town Issued Tax Bill or
 - 12 month Signed Rental Agreement
 And for
Child/Cohabitant:
 - Birth Certificate or
 - Marriage Certificate or
 - Utility Bill Showing Property Address

TYPE	FEE	
<input type="checkbox"/> Resident (New or Renewal)	\$875.00	
<input type="checkbox"/> Resident Freeze I* (<u>Renewal Only</u>)	\$679.00	Date of Birth: _____
<input type="checkbox"/> Resident Freeze II* (<u>Renewal Only</u>)	\$699.00	Date of Birth: _____
<input type="checkbox"/> Resident Freeze III* (<u>Renewal Only</u>)	\$724.00	Date of Birth: _____
<input type="checkbox"/> Resident Junior (12-18) (New or Renewal)	\$185.00	Date of Birth: _____
<input type="checkbox"/> Res. Young Adult (19-22) (New or Renewal)	\$315.00	Date of Birth: _____
<input type="checkbox"/> Resident 23-29 (New or Renewal)	\$675.00	Date of Birth: _____

GHIN HANDICAP INFO

GHIN # _____ NAME: _____ FEE: \$40.00

CHECK OR CASH ONLY
 Checks Made Payable to "Town of Dennis"
 Mail to: Dennis Golf, 825 Old Bass River Rd., Dennis, MA 02638

By signing below, you acknowledge the Rules and Regulations as set forth by the Board of Selectmen and Director of Golf, including the Rules Infractions, Alcohol Use Policy*** and Refund and Age Policies****. This membership entitles you to the privileges of the Dennis Pines and Dennis Highlands Golf courses as set by the Board of Selectmen and the Director of Golf. This membership may be cancelled or suspended at any time at the discretion of the Director of Golf if your actions are unbecoming of a member of the golf course.

***Alcohol is not permitted on any course unless purchased from the Restaurant on said premises. Violations will result in removal from golf course.
 **** Refund, Age and Alcohol Policies may be found online at www.dennisgolf.com or you may find a copy at the Pro Shop.

POLICY FOR MEMBERSHIP REFUNDS

1. Any member may receive a full refund of membership for any reason before March 1st of current membership year.
2. Any member may receive a full refund under the following conditions after March 1st prior to June 30th:
 - a. Documentation of a serious medical condition must be presented to the Director of Golf within 60 days after membership has been paid.
 - b. No more than 3 rounds of golf have been played since the membership payment was made. If 1, 2 or 3 round(s) of golf have been played then the cost of the green fee associated with the round(s) of golf will be deducted from the money refunded.
 - c. The 60 day period of eligibility for a refund does not go past June 30th of the current membership year.

Signature of Applicant: _____ Date: _____

GOLF CART RENTAL MARCH 1, 2022 THRU FEBRUARY 28, 2023

The golf cart is hereby leased to the indicated lessee for the date range indicated on said agreement. The lessee acknowledges that he/she has a valid driver's license and is familiar with the use of operation of the said cart, and he/she will use an operate the cart in a safe, prudent manner for the playing of golf. The lessee agrees to return the cart in the same condition as he/she received it and shall be responsible for any damage or breakage. The lessee also agrees that no right of action shall accrue to the lessee for any loss or damage to person or property arising from the use of the cart or resulting from any mechanical failure or component of the said cart. The lessee further agrees to hold Dennis Golf free and harmless against all claims arising from the operation of the said cart. The lessee shall assume the entire responsibility of loss or damage to cart, person or property caused by a guest passenger.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

AMOUNT COLLECTED: _____ PAYMENT TYPE: CASH CHECK # _____ GIFT CARD # _____

RECEIPT # _____ NEW ID TAKEN: _____

VERIFICATION: TAX BILL: 12-MONTH LEASE: COHABITANT: CHILD:

AGE VERIFICATION (FOR AGE RELATED MEMBERSHIPS) DRIVER'S LICENSE: BIRTH CERT: PASSPORT: STUDENT ID: STATE ID:

APPLICATION PROCESSED BY: _____ DATE: _____
 STAFF INITIALS