

LCC Junior Memberships

Learn, practice and play the great game of golf on one of the area's best courses.

For Ages 12 to 18

Junior Clinics and Camps held throughout the year

Price: \$180 for the year



Restrictions:

After 1-1:30 pm on weekends*; Weekdays, tee times

No signing privileges; must pay cash in clubhouse, pro shop and halfway house**

Valid drivers license required for cart rental

* until junior member has proven they can play without undue delay in required time period set forth by club rules

** unless permitted to charge to parent's club account



PO Box 597
Rt 711 S Country Club Rd
Ligonier, PA 15658

Phone: 724-238-7620

Fax: 724-238-3464

Email:

contact@ligoniercountryclub.com

Junior-Social Membership Package

Parents, join your child on the course and enjoy the many amenities of the club. Purchase a junior membership, and join as a social for \$220 (almost half off our regular social price)

Social Memberships:

Limited golf course access

- Two times per month
- After 2 pm on weekends
- Special rates apply

Optional Locker Rental

Dining room & Guest Privileges

Reduced golf fees (\$15 for 9 holes, \$30 for 18)

Party Room Charges waived

\$80 Food and Beverage Minimum per month

Add an additional Junior to a Junior-Social Package for only \$100



2020 JUNIOR MEMBERSHIP APPLICATION

Return to: Ligonier Country Club, PO Box 597, Ligonier, PA 15658
Phone: 724-238-7620 Fax: 724-238-3464 contact@ligoniercountryclub.com

Applying for:

Junior \$180 Add Social +\$240 Additional Junior +\$100 each

Total Dues: \$ _____

One-time Filing Fee (for Social) \$ 25.00

Application must be accompanied by payment of dues in full

Total Paid: \$ _____

Junior Member

Please Print: (*Required)

*Name _____ *Date of Birth ____/____/____

*Home Address _____

*Phone No ____/____/____ Email _____

Emergency Contact & Phone No: _____

Statement Options: Email Statement Mail Statement Both

Add Social Membership for:

Name _____ Date of Birth ____/____/____

Phone No ____/____/____ Cell/Alt No ____/____/____ Work No ____/____/____

Email: _____

Spouse's Name _____ Date of Birth ____/____/____ Email: _____

Additional Junior Membership(s) for:

Name _____ Date of Birth ____/____/____

Name _____ Date of Birth ____/____/____

*Membership Agreement

To the Board of Governors:

I/We hereby make application for membership to Ligonier Country Club, granting you the authority to verify the above information and:

- Agree to be governed by the by-laws and all rules and regulations of the Club and to pay all fees and charges.
- Understand that **Membership Renews Yearly**, until notice is received in writing by the office.
- Have read and understood all definitions, restrictions and fees that apply to my/our chosen membership category.
- Understand that we will be notified within 30 days of the status of our application.

IN WITNESS WHEREOF and intending to be legally bound hereby, I/We have executed this Agreement this ____ day of _____, 20____.

Signature of Applicant _____

Date: _____

Signature of Applicant _____

Date: _____

Referred/Sponsored by:

Previously a Member

I recommend this applicant for membership at Ligonier Country Club.

Print Name

Signature

Date

For Club Use Only

Date Received: _____ CC ____ Cash ____ Check no.: _____ Approved by Board of Directors: _____ Membership number: _____