**MEMBERSHIP APPLICATION 2022**

 MEMBER BENEFITS

Unlimited Golf

Participation in Club Member Events

Participation in Leagues

Early Membership Payment Incentive Program Opportunity to Run for the Board of Directors Right to Vote at Meetings of the Members

**Refer a New Member and Receive a $25 Gift Card**

Please return application and payment to:

Rocky Knolls Golf Course

PO Box 844

Custer, SD 57730

Payment can also be done online with credit card at [www.rockyknollsgolfcourse.com](http://www.rockyknollsgolfcourse.com/) under the member tab

Rocky Knolls Golf Course Membership Application

11/2021

# MEMBER INFORMATION

Name: DOB: Home Phone: Cell Phone: Home Address: City: State: Zip:

Personal Email:

# SPOUSE INFORMATION

Name: DOB: Cell Phone:

Personal Email:

# ADDITIONAL FAMILY MEMBER INFORMATION

(a dependent is an unmarried child under 19 residing with the member)

|  |  |  |
| --- | --- | --- |
| Name(s) | DOB | Relationship |
| (1)  |   |   |
| (2)  |   |   |
| (3)  |   |   |
| (4)  |   |   |

New Member? Did someone refer you to join? If so, who?

**Handicap/GHIN #**

(see membership info for GHIN costs)

Name(s) GHIN #

(1)

(2)

**MEMERSHIP POLICIES**

I agree to conform to and be bound by this Membership Agreement, the Bylaws and the Rules & Regulations, and the membership policies of Rocky Knolls, as they may be amended from time to time. I acknowledge that membership dues are non-refundable and non-transferable.

Signature: Date:

$195

$235

$195

$490

Annual Trail Fee for Off Premise Carts

Annual Cart Lease (when available, member can use golf course cart)

**GOLF CART OPTIONS**

Cart Stall Number

Cart Stall Number

Gas Cart Storage

Electric Cart Storage

**MEMBERSHIP CLASSIFICATIONS**

\*all prices include 6.5% sales tax

Level 1 Single (Ages 25-34)

Level 1 Family (Ages 25-34)

Level 2 Single (Ages 35+) payment received by 1/31/22 Level 2 Family (Ages 35+) payment received by 1/31/22

Level 2 Single (Ages 35+) payment received by 3/31/22 Level 2 Family (Ages 35+) payment received by 3/31/22

Level 2 Single (Ages 35+) payment received on or after 4/1/22

Level 2 Family (Ages 35+) payment received on or after 4/1/22

$390

$560

$585

$840

$620

$885

$660

$920

Single Junior (Ages 12-19)

Young Adult (Ages 20-24)

$ 85

$285

New Member Single (has not been a member for previous 2 seasons)

New Member Family (has not been a member for previous 2 seasons)

$390

$560

**HANDICAP/GHIN #**

GHIN # fee

$30

Payment must be received by 2/1/22 otherwise your GHIN # will be deactivated. Reactivation will only occur when payment is received.

GHIN # are required to play in the member guest tournament and many other tournaments.

**Additional Contribution To The Course Irrigation Fund Appreciated** $

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Rocky Knolls Golf Course, PO Box 844, Custer, SD 57730

# BUSINESS MEMBERSHIP

 Business (available to all businesses) (all prices include a 6.5% sales tax)

Option 1 $2,800

- Four (4) single employee memberships of unlimited golf

-Fifteen (15) rounds of (9) holes of golf to give out to anyone

-Advertising on (1) tee box, (1) club house sign, and digital advertising (you provide the signs)

-Special event pricing for corporate events

Option 2 $1,570

- Two (2) single employee memberships of unlimited golf

-Ten (10) rounds of (9) holes of golf to give out to anyone

-Advertising on (1) tee box, (1) club house sign, and digital advertising (you provide the signs)

-Special event pricing for corporate events

\*Additional single employee memberships may be purchased at $585 each

\*\*Proof of employment with the Business Member of each employee must be provided if/when requested by Rocky Knolls

A Business Membership shall be applied for, issued to and held in the name of a legal entity or business (the “Business Member). The privileges of the Business Membership belongs to the Business Member, and the Business Member must designate the number of individuals specified below who will be entitled to exercise the privileges of membership (the “Employee”). All rights of ownership (i.e., transfer rights, if applicable) shall belong to and exercised by the Business Member only.

Business Name: Business Address & Phone: Business Email: Business Member Signature: Date:

Employee Name: Employee Email: Employee Name: Employee Email: Employee Name: Employee Email: Employee Name: Employee Email: