

## **MEMBERSHIP APPLICATION 2024**

## **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

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 under the member tab

4% service fee will be added to the total for credit card use.

MEMBER INFORMA	ΓΙΟΝ	
Name:		
DOB:Home Phone:	Cell Phone:	
Home Address:		
City:State:	ip:	
Personal Email:		
SPOUSE INFORMAT	TON	
Name:		
DOB:Cell Phone:	<u> </u>	
Personal Email:		
ADDITIONAL FAMILY MEMBER	INFORMATION	
(a dependent is an unmarried child under 19	residing with the men	nber)
Name(s)	DOB	Relationship
(1)		
(2)		
(3)		
(4)		
Handicap/GHIN #	!	
(see membership info for G		
·	,	
Name(s)	GHIN#	
(1)		
(2)		
MEMERSHIP POLIC	ies	

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:	
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MEMBERSHIP CLASSIFICATIONS *all prices include Sales Tax			
Level 1 Single (Ages 25-34)	\$400		
Level 1 Family (Ages 25-34)	\$575		
Level 2 Single (Ages 35+) payment received by 1-31-24			
Level 2 Family (Ages 35+) payment received by 1-31-24			
Level 3 Single (Ages 80+)			
Level 3 Couple (Ages 80+)			
Level 2 Single (Ages 35+) payment received by 3-31-24	\$640		
Level 2 Family (Ages 35+) payment received by 3-31-24	\$910		
Level 2 Single (ages 35+) payment received on or after 4-1-24	\$680		
Level 2 Family (Ages 35+) payment received on or after 4-1-24	\$950		
Single Junior (Ages 12-19)	\$90		
Young Adult (Ages 20-24)	\$295		
New Member Single (has not been a member for previous 2 seasons)	\$400		
New Member Family (has not been a member for previous 2 seasons)	\$575		
GOLF CART OPTIONS			
Gas Cart Storage Cart Stall Number	\$220		
Electric Cart Storage Cart Stall Number	\$265		
Cart storage options are to be PAID WITH MEMBERSHIP.			
Annual Trail Fee for Off Premise Carts	\$220		
Annual Cart Lease Single (when available, member has use of Rocky Knolls cart)	\$600		
Annual Cart Lease Family (when available, member has use of Rocky Knolls cart)	\$750		
HANDICAP/GHIN	•		
GHIN # Fee	\$30		
GHIN # are required to play in men's league, member/guest tournaments and other tou			
Payment must be received by 5-1-24 otherwise your number will be deactivated. Reactivation will occur when payment is received. <b>If you are playing men's league, GHIN must be paid with membership.</b>			
Donation to the Course Irrigation Fund	\$		

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## **BUSINESS MEMBERSHIP**

Business (available to all businesses) (all prices include sales tax)

Option 1 \$2,890

- 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 \$1,620

- 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: