



MEMBERSHIP APPLICATION 2026

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 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) _____	_____	_____

Handicap/GHIN

(see membership info for GHIN costs)

Name(s)	GHIN #
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(1) _____	_____
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(2) _____	_____
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MEMBERSHIP 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: _____

MEMBERSHIP CLASSIFICATIONS

*all prices include Sales Tax

Level 1 Single (Ages 25+) payment received by 1-31-26	\$600
Level 1 Family (Ages 25+) payment received by 1-31-26	\$865
Level 2 Single (Ages 80+)	\$500
Level 2 Couple (Ages 80+)	\$650
Level 1 Single (Ages 25+) payment received by 3-31-26	\$640
Level 1 Family (Ages 25+) payment received by 3-31-26	\$910
Level 1 Single (ages 25+) payment received on or after 4-1-26 ...	\$680
Level 1 Family (Ages 25+) payment received on or after 4-1-26 ...	\$950
Single Junior (Ages 12-19)	\$100
Young Adult (Ages 20-24)	\$295
New Member Single	\$600
New Member Family	\$865
Total Membership Paid	\$ _____

GOLF CART OPTIONS

Gas Cart Storage	Cart Stall Number _____	\$230
Electric Cart Storage	Cart Stall Number _____	\$275

Cart storage options are to be PAID WITH MEMBERSHIP.

Annual Trail Fee for Off Premise Carts	\$275
Annual Cart Lease Single (when available, member has use of Rocky Knolls cart)	\$625
(effective 4-15-2026 to 10-15-2026)	
Annual Cart Lease Family (when available, member has use of Rocky Knolls cart)...	\$775
(effective 4-15-2026 to 10-15-2026)	

Total Cart Fees Paid	\$ _____
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HANDICAP/GHIN

GHIN # Fee	\$30	Total GHIN FEES PAID \$ _____
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GHIN # are required to play in men's league, member/guest tournaments and other tournaments.

Payment must be received by 5-1-26 otherwise your number will be deactivated. Reactivation will occur when payment is received. **If you are playing men's league, GHIN must be paid with membership.**

Donation to the Course Improvement Fund	\$ _____
Any amount appreciated.	

Please return application and payment to

Rocky Knolls Golf Course , P.O. Box 844, Custer SD 57730

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 name 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: _____