

TETON PINES COUNTRY CLUB

Application For Club Membership

By my signature below, I hereby submit my application for membership at Teton Pines Country Club. If accepted, I wish to have the following activity level of membership (please check):

\$2,500 NON REFUNDABLE Initiation Fee (payable in four annual installments)

SEASONAL MEMBERSHIP 2019 – Application MUST be received by September 30

_____ Family \$2,600 Seasonal Fee or _____ Single \$1,800 Seasonal Fee

Primary Member: _____ Date of Birth _____

Marital Status: ___ Single ___ Married

e-mail _____ Anniversary _____

Name of Spouse _____ Date of Birth _____

e-mail _____

JH Mailing Address _____

City _____ State _____ Zip Code _____

JH Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Other Address Summer/Winter

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Please notify Teton Pines when you want your mailing address changed.

CHILDREN (those under 26 years of age, please)

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

GRANDCHILDREN (those under 26 years of age, please)

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

AREAS OF THE CLUB OF MOST INTEREST TO ME/MY FAMILY (check as many as apply)

TENNIS ___ Couples' ___ Men's ___ Ladies' ___ Junior's ___ PICKLE BALL ___
FITNESS CLASSES ___ DINING ___ COCKTAIL PARTIES ___ BRIDGE/CARD GROUPS ___
SOCIAL EVENTS ___ NORDIC SKIING ___ ALPINE SKI GROUP ___ SKI SHUTTLE ___

SOCIAL DATA

I hold or have held memberships in the following golf and/or social clubs for the times indicated:

Name of Organization	Location	Years of Membership
_____	_____	_____
_____	_____	_____

I am acquainted with the following members of Teton Pines Country Club:

The Club reserves the right to ask for any interview and/or letter of recommendation in addition to this application.

If accepted for membership, I agree to pay the appropriate Membership Fee within ten (10) days of written notification from the Club that my application has been accepted.

If accepted for membership, I understand that my membership rights will be only as set forth in the provisions of the Club Bylaws and the Club Rules and Regulations as in effect at the present time, copies of which have been made available to me. The Bylaws and Rules and Regulations are subject to amendment and modification in accordance with their terms.

I agree to pay such dues and other charges made against my Club account. Club accounts will be deemed delinquent from the date first billed if payment is not received within 30 days after the date of the monthly statement. Past due bills will be subject to a one and one-half percent (1.5%) late payment charge per month.

I specifically have taken the time to review and understand transfer rights (if any) and procedures that relate to my membership.

Signed _____ Date _____

Accepted by Teton Pines Club Committee by:

_____ Date _____

PLEASE SUBMIT AN ELECTRONIC PHOTO OF YOU AND YOUR SPOUSE / S.O.
FOR YOUR CLUB ACCOUNT & RECORDS TO: MEMBERSHIP@TETONPINES.COM

This is the final offering of a Seasonal Membership. As of October 1, 2019 only annual memberships will be sold. The seasonal membership is renewable annually with a seven month term. The seasonal fee must be paid by November 1 each year in order to maintain the seasonal membership.

**If you have any questions please call:
Amy Bickley – Director of Membership 307.732.4102**