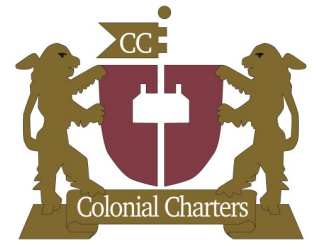




New Membership Application
Colonial Charters Golf Club
301 Charter Drive
Longs, SC 29568
843-399-4653



Date: _____

Full Name: _____

Spouse's Name (if Family Membership only) : _____

Mailing Address: _____

E-mail Address: _____

Phone Number: _____

Membership privileges start on the date of application and when first payment is accepted.

First payment due will be the first 6 months of dues.

Dues will be paid monthly starting on the seventh month of membership.

A payment method on file is required for monthly payment. Without payment method on file, dues will be paid annually.

Monthly dues will continue until membership is discontinued.

Membership may be discontinued any time with a written membership resignation.

Colonial Charters Golf Club reserves the right to revoke or deny any memberships at any time.

Dues increases are at the discretion of the club. Membership dues are non-refundable.

Current Colonial Charters Golf Club Membership Dues

Single Membership \$ 167 + 7.5 % sales tax = \$ 179.53 monthly
(\$ 1000 + tax = \$ 1075 due at signing)

Family Membership* \$ 233 + 7.5% sales tax = \$ 250.48 monthly
(\$ 1400 + tax = \$ 1505 due at signing)

*Family memberships consist of the member and spouse, and any children living at home under the age of 18 years old, and any children that are full time students under the age of 23. If applicable, please write the names and ages of children on the back of this form.

By signing below, I agree to all terms of this application and the attached "New Membership Agreement". I also understand that the agreement may be amended at any time if deemed necessary.

Signature: _____ Date: _____



New Membership Agreement

- Club Membership includes privileges beginning on date of contract until formal termination by either party.
- Membership dues are billed monthly. Membership dues are non-refundable. Accounts over 60 days past due will be suspended until the account is paid in full.
- Conduct detrimental to the use of the golf course, other members, guests and/or staff may result in termination of membership. Colonial Charters reserves the right to revoke or deny any memberships at any time.
- Membership dues may increase at the discretion of the Club.
- Proper golf attire is required.
- Membership may book starting times one week in advance. Starting times may be booked in the Golf Shop or by calling 843-399-4653.
- Each member may have up to three accompanied guests play golf for the “Guest of Member” rate. Guest play may be limited.
- Members that fail to show up for, or properly cancel their tee times are subject to be charged the full value of the starting time.
- Club Membership includes an Honors Club Card and all its privileges. (Does not qualify for purchase gift card.)
- Discontinued Club Memberships must wait 12 months to rejoin.
- Medical disruptions that result in the inability to use club privileges will be handled by the Founders Group Membership Director. If approved, Club members may be eligible for a 75% reduction of monthly dues for a period of 2 to 6 months with medical documentation.
- Handicap Services: \$ 25 per club member for a calendar year. (Subject to change if handicap service costs increase.)
- Members receive a 20% discount on non-sale soft goods and 10% off non-sale hard goods in the Golf Shop.
- Members receive a 20% discount in the grill (excluding alcohol, tobacco, special events, and daily specials.)

I have read the above membership agreement and I agree to abide by all regulations.

Signature: _____

Date: _____



Your club membership includes a complimentary Honors Club Card and all its privileges.

The following information is required to set up your individual Honors Club account(s).

Please provide a Username and Password that you will remember. (Your password may be changed in your account at any time.)

You will be able to log in to your Honors Club account at www.PrimeTimesHonors.com.

Name: _____

Phone: _____ Email: _____

Username: _____ Password: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Key Tag #: _____

Family Memberships - please also fill out Spouse's information.
(This information is not needed for Single Club Membership.)

Spouse's Name: _____

Spouse Phone: _____ Spouse Email: _____

Username: _____ Password: _____

Key Tag #: _____

