



Membership Information

Applicant Name:
Birthdate:

Email Address:

Spouse's Name:
Birthdate:

Email Address:

Summer Address

Dates: to

Phone:

Day

Evening

Winter Address:

Dates to

Phone

Day

Evening

Please list all children 16 and under:

Birthdate

1.

2.

3.

Other Information:

In case of Emergency, Please notify:

Name:

Relationship:

Phone Number:

Physician:

Phone Number

Health Insurance:

Policy Number:



Membership and Account Billing Information

Name:
Address:

Membership Account Enrollment

Upon approval of this application, an account will be established in the applicant's name and a corresponding member number will be assigned. The member number also serves as an account and may be used to charge purchases at the Samoset Golf Shop, Samoset Clubhouse Grille, Samoset Resort Gift Shop, Splash Pool Bar, La Bella Vita Ristorante.

At the conclusion of each month your credit card will be charged the total amount due to the Samoset Resort. Any questions pertaining to your account may be directed to the Samoset Resort Golf Shop staff. Therefore, in order to establish your account, we will require a major credit card number and your signature.

Credit Card Type

Credit Card Number:

Expiration Date:

Card Holder Signature:

Date:

Membership Type	Applicant	Spouse	Children
Golf Membership	\$2,300	\$1,100	\$300 per child
Young Executive*	\$1,500		
Senior Membership*	\$1200		
Twilight Membership*	\$1,250	Range	or Cart
Junior Membership*	\$500		
* Restrictions Apply			

Membership Amenities	Applicant	Spouse
Full Locker	\$139	\$139
Half Locker	\$79	\$79
Quarter Locker	\$39	\$39
Bag Storage	\$115	\$115

Total Due:

- Check enclosed
- Please bill the above Credit Card

