



SUMMIT

APPLICATION FOR MEMBERSHIP

APPLICANT NAME _____

PERSONAL EMAIL _____ CONTACT PHONE NUMBER _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH ____/____/____

RESIDENCE _____ CITY _____ STATE _____ ZIP _____



BUSINESS/COMPANY NAME _____ POSITION/TITLE _____

BUSINESS PHONE _____ BUSINESS EMAIL _____

BUSINESS ADDRESS _____ CITY _____ STATE _____ ZIP _____



SPOUSE NAME _____ DATE OF BIRTH ____/____/____

CONTACT PHONE NUMBER _____ EMAIL ADDRESS _____

BUSINESS/COMPANY NAME _____ POSITION/TITLE _____

BUSINESS ADDRESS _____ CITY _____ STATE _____ ZIP _____



MEMBERS OF MY FAMILY RESIDING WITH AND DEPENDENT UPON ME AUTHORIZED TO USE THIS MEMBERSHIP:

I.E. CHILDREN UNDER THE AGE OF 25

NAME _____ RELATIONSHIP _____ DATE OF BIRTH ____/____/____

NAME _____ RELATIONSHIP _____ DATE OF BIRTH ____/____/____



PLEASE SEND MY MONTHLY STATEMENT TO:

HOME ADDRESS BUSINESS ADDRESS EMAIL _____

PLEASE SEND MY MONTHLY NEWSLETTER TO: HOME ADDRESS BUSINESS ADDRESS

PLEASE EMAIL EVENT REMINDERS TO: _____ & _____



PROPOSING MEMBER ATTESTS TO HAVING KNOWLEDGE OF THE GENERAL GOOD CHARACTER OF THE APPLICANT

PROPOSING MEMBER _____ MEMBER NUMBER _____

PROPOSING MEMBER SIGNATURE _____

PROPOSING MEMBER _____ MEMBER NUMBER _____

PROPOSING MEMBER SIGNATURE _____



If I Shall Become A Member Of The Summit, I Affirm That I Will Familiarize Myself With, Comply With, And Observe The By-Laws, Rules, And Regulations Of The Club, And Agree That Membership To The Club Shall Be Subject To All Such By-Laws, Rules, And Regulations Now In Force And Those Which May Be Adopted In The Future.

SIGNED THIS _____ DAY OF _____ 20 _____ APPLICANT SIGNATURE _____

APPROVED BY BOARD OF GOVERNORS PRESIDENT _____

