



Desert Falls Country Club

Seasonal Golf Membership Application (2024-2025)

Single	Couple
\$5000 for 3 month	\$7,500 for 3 month
\$6,500 for 4 month	\$9,500 for 4 month

Name: _____

Address: _____

Phone: _____

Email: _____

Nov ___ Dec ___ Jan ___ Feb ___ Mar ___ Apr ___ May ___ June ___ July ___ August ___ Sept ___

Fees must be paid in full for seasonal members

3.00% surcharge will be added if paid with a credit card .

There will be a \$35 dollar penalty for Dishonored Checks

No Charging privileges

Signature _____ Date _____

Membership Benefits include:

Use of Golf Course

Complimentary Range Balls

Access to practice Facility and Short Game Area

Cart Fee & Trail Fee

Member Tournaments

10% Discount on Food & Beverages in the Grille and snack bar (includes social events)

15% Discount in Golf Shop (Soft Goods Only)

20% Discount on Green Fees for Member Guests (Must be accompanied with Member)

Optional Fees:

Must be paid in full up front

Club Storage - \$25 Monthly Single

\$40 Monthly Couple

Pull Cart Storage - \$25 Monthly Single

\$40 Monthly Couple

3.00% surcharge will be added if paid with a credit card

There will be a \$35 dollar penalty for Dishonored Checks

Terms of Membership

_____ I understand that my seasonal membership fee is non-refundable and non-transferable and does not grant me any proprietary rights to ownership to the club, nor does my acceptance as a seasonal member for payments to the club guarantee future membership rights to the club.

_____ I further understand that upon acceptance for my seasonal membership in the club, I will abide by the rules of the club, and all operational directives set by Club management.

_____ I further understand while using Desert Falls Country Club golf carts, I will take full responsibility for any damages that may occur.

_____ I further understand that Desert Falls Country Club will not be liable for any damaged or stolen property while using our facility for storage.

_____ I hereby acknowledge that the use of the Club facilities and any privileges or service incident to Membership is undertaken with knowledge of risk of possible injury. I hereby accept any and all risk of injury to myself, my guests, and family sustained while using the Club facilities or involved in any event or activity incident to membership in the respective directors, officers, partners, shareholders, employees, agents and affiliates and the members of the Club from any loss, claims, injury, damages, or liability sustained or incurred by me, my guests and my family resulting from or arising out of any conduct or event connected with membership in the Club and the use of its facility.

_____ I hereby acknowledge receipt of the Club membership plan and that I have read and understand them and agree to be bound by the terms and conditions thereof as the same may be amended from time to time by the Club. I further acknowledge that I am not relying on oral representation in acquiring a membership in the Club.

Primary Candidates Signature _____ Date _____

Spouse or Signature of Equivalent Other _____ Date _____