

Bay Springs Country Club Social Membership Application

(This membership includes swimming, tennis, fishing, rental discounts & voting rights but does not include golf.)

Name _____ Date of Birth _____

Spouse's Name _____

Mailing Address _____ Home ph. _____

_____ Cell ph. _____

E-mail address _____

Employer _____ Work ph. _____

<u>Name of Children</u>	<u>Age</u>	<u>In School Where?</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Babysitter(s) _____

(Children listed must live with you or belong to you or your spouse unless special arrangements have been made in advance. **Children age 21 and up who are married or are not in school are not eligible under their parent's membership.**) A non-member babysitter may only come if a parent can't or if member has 2 or more small children. Babysitters are not allowed to bring a guest except on guest day. Babysitters must stay at the pool. The undersigned hereby makes application for a Social Membership for swimming, tennis, fishing and voting rights at Bay Springs Country Club, and when accepted agrees to abide by all the rules and regulations as set forth in the By-Laws of Bay Springs Recreation Assoc., Inc. and those rules and regulations set forth in the rules of the pool and tennis facility and the fishing ponds.

It is understood that the cost for this limited membership is **\$60.00 per month** payable by bank draft. Submit your first month's dues with your application. By paying 1 year in advance, you can save 1 month's dues. You only pay for 11 months but receive 12 months use of facilities. All first-time members must be recommended by 2 current voting members in good standing and require approval by the Board of Directors. When we receive your application and draft authorization, you may assume you have been approved for membership and begin using the facilities immediately unless notified otherwise. (Questions- Call or text Susan at 601-764-8444)

Applicant's Signature

Date

The following recommendations are required for all **1st time** members.

Recommended by 1. _____

Members Name

Members Phone Number

2. _____

Members Name

Members Phone Number

Be sure to ask for a copy of pool rules and guest rules when you submit this application.

***Mail application & draft form to: Susan McNeil, P. O. Box 444, Bay Springs, MS 39422
Phone 601-764-3403 or 764-8444 / Email smcneil@bayspringstel.net***

AUTHORIZATION TO HONOR CHECKS OR DRAFTS DRAWN BY
BAY SPRINGS RECREATION ASSOCIATION. Inc.
Doing Business as
BAY SPRINGS COUNTRY CLUB

Name of Bank: _____

Bank Address: _____

City, State & Zip: _____

As a convenience to me, I hereby request and authorize you to pay and charge to my account checks or drafts drawn on my account by and payable to the order of **BAY SPRINGS COUNTRY CLUB**, provided there are sufficient collected funds in said account to pay the same upon presentation. I agree that your rights in respect to each such check or draft shall be the same as if it were a check drawn on you and signed personally by me. This authority is to remain in effect until revoked by me in writing (no sooner than 1 year from date of membership contract), and until you actually receive such notice, I agree that you shall be protected in honoring any such check or draft.

I further agree that if any such check or draft be dishonored, whether with or without cause and whether intentionally or inadvertently you shall be under no liability whatsoever even though such dishonor may result in the forfeiture of my membership.

Print Name as used for Bank Account

Signature as used for Bank Account

Bank Routing Number

Bank Account Number

Date

Witnessed by:

Please complete and mail to Bay Springs Country Club, P. O. Box 613, Bay Springs, MS, 39422 along with completed application or email to bayspringscc@bayspringstel.net