



Fairwinds Practice & Play Program Application

Range I.D. No: _____

NAME: _____

PHONE NO: _____ EMAIL: _____

EXPIRATION DATE: October 31, 2021

PLEASE CIRCLE CHOICE: (Sales tax included)

| | <u>Husband & Wife</u> | <u>Single</u> | <u>Juniors (7-17)</u> |
|----------------------------|---------------------------|--------------------|-----------------------|
| Nov 1, 2020 – Oct 31, 2021 | \$525 | \$325 | \$150 |
| Seasonal Monthly | \$150 per month | \$100.00 per month | NA |

Annual fees prorated based on date of purchase.

I have received a copy of the 2012-2021 Rules and Regulations for Fairwinds Driving Range and agree to abide by them as stated. Failure to comply with these rules could result in loss of Driving Range privileges and/or membership.

Signature: _____ **Date:** _____

Staff: Please complete the information below and make sure correct season is circled above

Received Payment: _____

Provided Bag Tag: _____

Entered on Membership List: _____