



EAGLE RIDGE SEASON PASS APPLICATION FORM 2019

PASS HOLDER'S NAME: _____
 MAILING ADDRESS: _____ STATE: _____ ZIP: _____
 PHONE NUMBER: (M) _____ (H) _____
 EMAIL ADDRESS: _____

TYPE OF SEASON PASS (PLEASE TICK ONE):

- SINGLE
- COUPLE*
- FAMILY*
- EARLY BIRD**
- SENIOR SINGLE
- SENIOR COUPLE
- HIGH SCHOOL STUDENT
- COLLEGE STUDENT

*FOR FAMILY/COUPLE PASSES, PLEASE KINDLY INCLUDE:

SPOUSE/SIGNIFICANT OTHER'S NAME: _____
 1ST CHILD'S NAME: _____ AGE: _____
 2ND CHILD'S NAME: _____ AGE: _____
 3RD CHILD'S NAME: _____ AGE: _____
 4TH CHILD'S NAME: _____ AGE: _____
 5TH CHILD'S NAME: _____ AGE: _____

**EARLY BIRD PASSES APPLIES TO SENIORS OVER 65 YEARS OF AGE AND TEE TIME BEFORE 12 NOON.

PLEASE CIRCLE ACCORDINGLY FOR THE FOLLOWING:

DO YOU KEEP A CART IN THE STORAGE SHED? YES NO
 IF YES, WITH WHOM: _____
 DO YOU WISH TO PURCHASE A RANGE PASS? YES NO
 DO YOU WANT A CART PASS? YES NO
 DO YOU WISH TO ENROLL IN THE GHIN HANDICAP? YES NO

PLEASE TICK THE SEASON PASS AMOUNT ACCORDINGLY:

SINGLE	\$935.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
COUPLE	\$1026.17 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
FAMILY	\$1092.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
HIGH SCHOOL STUDENT	\$150.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
COLLEGE STUDENT	\$500.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
SENIOR SINGLE	\$855.14 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
SENIOR COUPLE	\$982.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
EARLY BIRD	\$531.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
CART PASS	\$690.12 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
RANGE PASS	\$200.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
CART STORAGE	\$254.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
SHARED CART STORAGE	\$127.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
TRAIL FEE	\$273.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
SHARED TRAIL FEE	\$136.50 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>
GHIN HANDICAP	\$30.00 (Inclusive of 8% Sales Tax)	<input type="checkbox"/>

TOTAL AMOUNT: _____

IF YOU ARE MAILING IN YOUR APPLICATION AND PAYMENT, PLEASE MAKE CHECK PAYABLE TO:

EAGLE RIDGE GOLF CLUB

MAILING ADDRESS: P.O. BOX 4125
 WILLISTON, ND 58802

SHOULD YOU REQUIRED MORE INFORMATION, PLEASE KINDLY EMAIL: eagleridgegolf@nemont.net