

Date Received _____

Date Posted _____

Nomination must be returned to a Member of the Board of Directors of South Side Country Club, the General Manager, the Club Office or the Pro Shop.



NOMINATION FOR SUMMER MEMBERSHIP TO South Side Country Club

1650 COTTAGE DRIVE DECATUR, ILLINOIS 62521
PHONE 423-7789

Date: _____ 20 ____

BOARD OF DIRECTORS:

Ladies and Gentlemen:

I desire to propose the name of: _____ for membership at South Side Country Club as a summer member.

Date of Birth: _____

Residence Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Spouse's Email: _____ Spouse's Cell Phone: _____

Employer

Profession or Occupation: _____ Place of Work: _____

Work Phone: _____ Work Address: _____

Other members of South Side Country Club who personally know the nominee:

(Nominee is to fill in statement below and sign on reverse side to signify consent to nomination)

I accede to the proposal of my name and make the following statement in connection therewith:

Nominee's Family:

Name	Birth Date	Primary Club Interest
Nominee's Given Name & Familiar Name if Different	_____	_____
Spouse/Significant Other First & Last Name	_____	_____
Dependent Child's Name	_____	_____
Dependent Child's Name	_____	_____
Dependent Child's Name	_____	_____
Dependent Child's Name	_____	_____

REGULATIONS GOVERNING FINANCIAL OBLIGATIONS

Member agrees the membership payment of \$1350 shall not be refundable, redeemable or transferable under any circumstances whatsoever including but not limited to the closure of the pool, dining facilities, or termination of Membership for whatever reason. There is no food and beverage minimum per summer term.

The By-Laws of the Club provide that application for membership shall be accompanied by the entrance fee, and the amount of membership dues and capital contribution for the current dues period; and the application shall be posted on the Bulletin Board of the Club for ten days prior to action by the Board of Directors.

Monthly dues and capital contributions and all current charges are payable in full by the 20th of each month or a late fee of \$50 will be added to the statement.

Pursuant to Section 18 of the By-Laws and policies adopted in accordance therewith, any member who is delinquent in payment of dues, capital contributions, assessments, and purchases on credit by more than 30 days shall lose all privileges and use of the club. I agree to pay all costs of collection, including reasonable attorneys' fees, in the event the club is required to pursue third-party collection or legal action against me to recover the amount of the delinquency

Statements will only be emailed to Nominee's email provided on page 1

The attached credit card authorization form must be completed and returned with this application.

Signature of Nominee

Date



Credit Card Authorization Form

Please complete all fields. Please contact South Side Country Club at 217-423-7789 or email southsidecountryclub.com if you have any questions. This authorization will remain in effect until membership ends.

Credit Card Information	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> ACH Debit <input type="checkbox"/> Other _____
Cardholder Name (as shown on card):	_____
Bank Name	_____
Card Number:	_____
Expiration Date (mm/yy):	_____ 3 Digit Security Code _____
Cardholder ZIP Code (from credit card billing address):	_____

I, _____, authorize South Side Country Club to charge my credit card above for all unpaid charges when my statement has not been paid (by the 20th of the month) and also adding a \$50.00 late fee. I understand that my information will be saved to file for future tardy transactions on my account.

Member Signature

Date