



BIRCK BOILERMAKER GOLF COMPLEX 2019 MEMBERSHIP APPLICATION

Last Name: _____

First Name: _____ Middle Initial: _____

Address: _____

City: _____ Zip: _____ Date of Birth: _____

Phone #: _____ Email: _____

Please fill out if applicable:

JPC/Staff/Faculty/Student ID#: _____

Spouse & Dependents Names: _____

2019 BBGC MEMBERSHIPS				
	SINGLE		FAMILY	
	WALKING	RIDING	WALKING	RIDING
RESIDENT	\$ 2,700	\$ 3,300	\$ 2,900	\$ 3,600
JOHN PURDUE CLUB MEMBER	\$ 2,500	\$ 3,100	\$ 2,700	\$ 3,400
PURDUE STAFF/FACULTY	\$ 2,500	\$ 3,100	\$ 2,700	\$ 3,400
PURDUE STUDENT	\$ 1,400	\$ 2,000	\$ 2,500	\$ 3,200
JUNIOR (under 36)	\$ 2,200	\$ 2,800	\$ 2,500	\$ 3,100
BOILER SPECIAL - SENIOR (60+)	\$ 1,600	\$ 2,200	\$ 1,800	\$ 2,500
BOILER SPECIAL - TWILIGHT	\$ 1,600	\$ 2,200	\$ 1,800	\$ 2,500

Family = spouse and children under 25 years old in same household

Junior = Under 36 years old

Senior = Mon-Fri Anytime; Sat-Sun Twilight; Offseason

Boiler Special = Twilight times; Offseason

All Memberships Include:

- Unlimited Greens Fees & Range Balls
- 14 day in advance preferred tee times
- IGA Handicap service
- 10% discount on merchandise
- Reciprocal rates at partner Pete Dye Trail Courses

Members are expected to observe proper conduct and decorum at all times and must abide by the rules and regulations of the Birck Boilermaker Golf Complex (BBGC). These rules are not intended to restrict or restrain the conduct or activities of members, but are necessary for the benefit of the majority. Total amount is due upon receipt of application unless a payment plan has been arranged in advance, in which the first payment is due upon receipt of application. The BBGC, at its sole discretion, reserves the right to revoke the privileges of any member with a late payment history or those that do not abide by the rules and regulations of the BBGC. By signing this agreement, I acknowledge the terms above and understand that memberships at the BBGC are annual passes, valid through December 31st 2018.

Signature: _____ **Date:** _____

Official use only

Season Pass Type: _____ Amount: _____ Initials: _____

Payment in Full / Payment Plan / Payroll Deduction / Credit Card / Check / Cash / Invoice BBGC # _____