



# MEMBERSHIP APPLICATION

PLEASE COMPLETE THE FOLLOWING AND RETURN TO A PRO SHOP REPRESENTATIVE

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 NAME: \_\_\_\_\_

DEPENDENT NAME(S): \_\_\_\_\_

2022 BBGC MEMBERSHIP RATES				
	WALKING		RIDING	
RESIDENT	\$2,700		\$3,450	
JOHN PURDUE CLUB	\$2,500		\$3,250	
PURDUE FACULTY/STAFF	\$2,500		\$3,250	
PURDUE STUDENT	\$800		N/A	
JUNIOR (<36)	\$2,200		\$2,950	
SENIOR (60+)	\$1,600		\$2,350	
TWILIGHT/OFFSEASON	\$1,600		\$2,350	
MEMBER/GUEST EVENT			\$360	
<b>TOTAL AMOUNT DUE</b> (INCLUDING ANY FAMILY/DEPENDENTS)		<b>\$</b> _____		

### FAMILY MEMBERSHIPS:

Spouse and dependents under 25 years old in same household can be added for:

- \$200 (walking)
- \$400 (riding)

### ALL MEMBERSHIPS INCLUDE:

- Unlimited greens fees & range balls
- 21-day in-advance preferred tee times
- IGA handicap service
- 20% off soft goods
- 10% discount in Pete's Café
- 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 Birk 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 2022.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*TO BE COMPLETED BY BBGC REPRESENTATIVE ONLY*

MEMBERSHIP LEVEL: \_\_\_\_\_ WALKING  RIDING

AMOUNT DUE: \_\_\_\_\_ FULL  PAYMENT PLAN  BBGC REP INITIALS \_\_\_\_\_

PAYMENT METHOD: CREDIT CARD  CHECK  CASH  INVOICE  BBGC# \_\_\_\_\_