



277 Palmer Lane  
 Holly Springs, Mississippi 38635  
[www.kirkwoodgolf.com](http://www.kirkwoodgolf.com)  
 (662) 252-4888

## Corporate Membership

Option	Benefits	Monthly Dues
<b>Four Person Corporate</b>	Unlimited golf privileges; cart fee and range balls not included.* Tee times can be made up to 30 days in advance. * <i>Cart Fee presently \$20 per player and Range Balls are \$6 per bucket.</i>	\$280.00
In addition to golf, members will enjoy use of the swimming pool as well as charge privileges.		

*Rates effective July 1, 2023 and are subject to change.*

**Terms and Conditions of Membership:** Membership is valid for an initial 12 months from date of purchase. After the initial term the membership shall continue on a month to month basis and may be cancelled by either party. All changes or cancellation should be submitted in writing 30 days in advance to [Jennifer@KirkwoodGolf.com](mailto:Jennifer@KirkwoodGolf.com).

All dues and monthly charges will be billed to one credit card. It is your responsibility to notify us when your credit card information changes.

**Primary Member** \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Member** \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Member** \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Member** \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Authorization**

I agree to the terms and conditions of Membership and hereby authorize Club Management, LLC to charge the following credit card account for any dues, fees and charges associated with this Membership for a minimum of the initial 12 month term (*subject to rates included in Corporate Membership effective July 1, 2023*) and understand if payment is denied two times over a six month period due to NSF, this membership will be suspended and I will be required to pay the balance for the year in full to continue membership privileges. Upon completion of the year, we may return to monthly privileges.

**After the initial 12 month term, written notice is required to cancel membership.**

Name on Card \_\_\_\_\_

Account Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ SIC Code \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ Date Effective \_\_\_\_\_

**If your payment is denied two times over a six month period due to NSF, your membership will be suspended and you will be required to pay the balance of the year in full to continue membership privileges. Upon completion of the year, you may return to monthly payments.**