

RETURN TO:

418C HERITAGE VILLAGE, SOUTHBURY, CT, 06488

2023 MEMBERSHIP APPLICATION

HOW DID YOU HEA	AR ABOUT US?			
☐ Member Referral☐ Word-of-Mouth	_ 0	☐ Instagram ☐ Newspaper	Other:	
CANDIDATE INFO	RMATION			
Primary Candidate:			Date of Birth:	
Preferred Name:		Jr.	Sr. Other:	
Home Address:				
City:		State:	: Zip:	_
Phone:		Email:		
Marital Status: Single /	Married / Domestic	Partner		
Social Security (last 4 digi	ts):	Drivers License	#:	
Employer:		Туре	of Business:	
Title:		Leng	th of Employment:	(years)
Business Address:				
City:	Stat	e: Zip:	Phone:	
SPOUSE INFORMA	TION (Only Re	quired For Fami	ly Membership)	
Spouse/Significant Other	:			
Preferred Name:				_
Phone:		Email:		
Social Security (last 4 digi	ts):	Drivers License	#:	
Employer:		Type	of Business:	
Title:		Length of E	mployment:	(years)
Business Address:				
City:	Stat	e: Zip:	Phone:	

DEPENDENT INFORMATION (Optional)

[A Dependent is an unmarried child under 21 residing with the Candidate]

Name(s)	Date of Birth Charge Privileges?		
		Son / Daughter	Yes / No
		Son / Daughter	Yes / No
		Son / Daughter	Yes / No
		Son / Daughter	Yes / No

MEMBERSHIP INFORMATION (CHECK ALL THAT APPLY)

MEMBERSHIP LEVEL	SINGLE	FAMILY
FULL		
WEEKDAY		
JUNIOR (39 & UNDER)		
TWILIGHT (3PM)		
STUDENT (UNDER 21)		

I/We understand no portion of the membership dues or fees are refundable and that this is a nontransferable membership.

PAYMENT OF MEMBERSHIP ACCOUNT

Full, Weekday and Junior Members may accrue monthly charges on a Member Credit Account (restrictions may apply). Billing Statements are delivered via email on the 2nd of each month. Payment of Credit Account, including all dues, fees, and other applicable charges are due by the last day of each month. Members may view their account balance anytime via the online portal.

Twilight and Student Credit Accounts must have a credit card on file in order to accrue charges. Students Credit Accounts must have a parent/guardian over the age of 21 place a credit card on file. Past due balances (31+ days) will be charged to the credit card on file at any time, without notice.

Club reserves the right to suspend or revoke charge privileges for any Member at any time.

*Member charge accounts are only available at the Member's Primary Club. Charges are NOT accepted at reciprocal Clubs. Please bring payment when visiting the reciprocal Cubs for all charges.

For inquires regarding billing or membership benefits, please email membership@silopointcc.com.

MEMBERSHIP POLICIES

If accepted into membership, I/We agree to conform to and be bound by the enrollment terms contained herein, the Bylaws, the Rules and Regulations, and written membership policies of the Club ("Membership Documents") as they may be amended at management's discretion and from time to time. I/We further understand that agreeing to be bound by the Membership Documents is a part of my/our agreement for membership privileges with the Club. I/We specifically understand this membership is not divisible.

I/WE ACKNOWLEDGE THE MEMBERSHIP BYLAWS AND THE RULES AND REGULATIONS PROVIDE THE DETAILS OF THE CLUB'S MEMBERSHIP POLICIES, CONDUCT AND OBLIGATIONS, INCLUDING, BUT NOT LIMITED TO, PROVISIONS IN THE EVENT OF DIVORCE, FOR ARBITRATION OF DISPUTES, RESIGNATION, REDEMPTION OF MEMBERSHIPS, FINANCIAL OBLIGATIONS, DISCIPLINARY ACTION, RELEASE OF LIABILITY FOR PERSONAL INJURY AND THEFT. I/WE HEREBY FULLY RELEASE AND DISCHARGE THE CLUB, IT'S EMPLOYEES, AGENTS, SHAREHOLDERS, MEMBERS, MANAGERS, AFFILIATES AND ASSIGNS FROM ANY LIABILITY, INJURY, LOSS, DAMAGE OR CLAIM ARISING FROM MY/OUR USE OF THE CLUB FACILITIES.

By providing the address(es) (including e-mail) and phone number(s) above, I/We hereby give the Club my/our express written permission to contact me/us at each number or address. I/We acknowledge that the Club values my/our right to privacy, I/We understand that I/We can revoke this consent at any time by contacting the Club in writing. I/We agree the terms and conditions of my/our membership may not be added to, amended, or contraindicated in any way by evidence of prior, contemporaneous, or subsequent oral agreements of any kind and acknowledge there are no unwritten oral agreements of any kind.

By signing below, WE hereby certify that we hold a marriage license, or a certificate of domestic partnership or civil union, which evidences our existing spousal relationship. If we do not hold one of the above, we acknowledge that the Club requires execution of a separate Spousal Relationship Statement.

I/We authorize Club to check my/our credit and employment history and to obtain such information as Club deems necessary to accept my/our application and to extend credit to me/us under my/our membership account at the Club.

Resignation: I/We understand that I/We are obligated to Silo Point Country Club (or any future name thereafter) for a minimum of 12 months from the start date of enrollment to the Club. At that time, I understand and agree, that I may resign my membership at any time by providing a 30-day written notification sent via certified mail, or e-mail to the Club Manager or Membership Director is required for resignation from the Club, and I/We further agree that all charges, dues, and/or fees incurred during the 30-day period for valid debts. Any unpaid Dues, Fees, or valid debts will be due upon resignation. I/We understand there will be no refunds of monies paid to the Club for Membership Dues, services, or other. I/We understand that there may be a two-year waiting period to return to the Club with payment of any applicable initiation fee.

Primary Candidate:	Date:
Spousal Candidate:	Date: