

2024 MEMBERSHIP AGREEMENT

Breakfast Hill Golf Club
339 BREAKFAST HILL ROAD
GREENLAND, NH 03840
(603) 436-5001 / BREAKFASTHILL.COM

OFFICE
USE
ONLY

Primary Member Name: _____
Primary Member Phone: (_____) _____
Primary Member Email: _____
Spouse/Partner Member Name (if applicable): _____
Spouse/Partner Member Phone: (_____) _____
Spouse/Partner Member Email: _____

*** WRITE "SAME" UNDER ALL ADDRESS LINES IF UNCHANGED FROM PREVIOUS SEASON ***

Address: _____
City: _____ State: _____ Zip: _____

*** PHONE & EMAIL REQUIRED ***

Primary Member's GHIN number(s) from previous club (if applicable): _____
Spouse/Partner Member's GHIN number(s) from previous club (if applicable): _____

Indicate your membership selection with a prominent "check" mark next to the appropriate selection(s). All membership fees are due in-full by March 15, 2024.

FULL - \$2,600 Pay 100% on/by 12/21/2023 to receive incentive (range balls) _____
Limited to 85 Pay 50% on/by 12/21/2023 to get \$2,600 price; balance due on/by 3/15/24
Price increases by \$350 if no deposit on/by 12/21/2023
Additional spouse add \$2,200 (increases by \$350 after 12/21/2023 with no deposit)

WEEKDAY - \$1,500 Pay 100% on/by 12/21/2023 to receive incentive (\$125 Shop Credit) _____
Limited to 85 Pay 50% on/by 12/21/2023 to get \$1,500 price; balance due by 3/15/24
Price increases by \$350 if no deposit on/by 12/21/2023
Additional spouse add \$1,200 (increases by \$350 after 12/21/2023 with no deposit)

AFTERNOON - \$1,500 Pay 100% on/by 12/21/2023 to receive incentive (\$125 Shop Credit) _____
Limited to 85 Pay 50% on/by 12/21/2023 to get \$1,500 price; balance due by 3/15/24
Price increases by \$350 if no deposit on/by 12/21/2022
Additional spouse add \$1,200 (increases by \$350 after 12/21/2024 with no deposit)

SEASON-PASSES 7-DAY CART: \$720
(circle selection) 5-DAY CART: \$620
RANGE: \$420 for 2022 members; \$490 for non-members

*** RECOMMENDED TO PLACE CREDIT CARD ON FILE FOR SECOND-HALF OR ANCILARY PURCHASES ***

Type of Card/Credit Card #: _____
Expiration Date: _____ CV Code (on back of card): _____

RECOMMENDED - IN CASE OF EMERGENCY CONTACT INFORMATION
Name (First and Last): _____
Phone: _____
Relationship: _____

CHECK HERE IF YOU GIVE THE CLUB PERMISSION TO AUTOMATICALLY PROCESS ADDITIONAL BALANCE PAYMENT ON/BY DECEMBER 21, 2023. YOU MUST PROVIDE CARD INFO TO THE LEFT.
 CHECK HERE IF YOU GIVE THE CLUB PERMISSION TO AUTOMATICALLY PROCESS ADDITIONAL BALANCE PAYMENT ON MARCH 15, 2024. YOU MUST PROVIDE CARD INFO TO THE LEFT.

I/We have completely read and understand and will abide by the Breakfast Hill Golf Club Rules Policies. I/We accept and agree to be bound by all Club policies mentioned therein including penalty fees for non-cancelled tee times. To obtain a copy of Rules and Regulations, please contact the Director of Golf. By paying membership dues, the Member gives Breakfast Hill Golf Club permission to release contact information to other members.

Signature(s): _____ Date: _____



Payments accepted by cash, check, or credit card (Visa, MasterCard, American Express or Discover).
Make checks payable to "Breakfast Hill Golf Club".

FOR OFFICE USE ONLY: Point-of-Sale Copy Directory GHIN