

LAKE SHORE COUNTRY CLUB

1165 Greenleaf Road • Rochester, NY • 14612
(585) 663-9100
www.lakeshore-cc.com

Date of Application _____

Membership Number _____

Request is hereby made by the undersigned for:

- Family Golf Intermediate Family Golf
 Single Golf Intermediate Single Golf

APPLICATION FOR MEMBERSHIP

The following information is supplied for the consideration of Lake Shore Country Club.

Name _____ D.O.B. _____

Address _____

City _____ Zip _____

Home Phone _____ Business Phone _____

Email _____

Family members included in my membership:

Name of Spouse _____ D.O.B. _____

Name of Children _____ D.O.B. _____
(under age 18)

_____ D.O.B. _____

_____ D.O.B. _____

Occupation _____

(If retired, please advise us of your former business connection)

Club Affiliations (present and former) _____

♦ The membership year begins annually on January 1st and ends the following December 31st. All memberships are for that time period and resignations will not be effective prior to December 31st.

Signature of Applicant _____