



| GOLF SHOP USE ONLY: |                               |                             |                 |     |
|---------------------|-------------------------------|-----------------------------|-----------------|-----|
| N                   | MEMBER #:/ APPLICATION DATE:/ |                             |                 |     |
|                     | ME                            | MBER ENTERED:               |                 |     |
| Name:               |                               |                             |                 |     |
|                     |                               |                             |                 |     |
|                     | CITY                          |                             | STATE           | ZIP |
|                     |                               |                             |                 |     |
|                     |                               |                             |                 |     |
|                     | CC Expiration:                |                             |                 |     |
|                     |                               | KEEP THIS CAI               | RD ON FILE      |     |
| Signature:          |                               | agree to abide by all rules | and regulations |     |

## SEND OR DROP OFF COMPLETED FORM TO:

Orange County National 16301 Phil Ritson Way Winter Garden FL, 34787

OR

Celebration Golf Club 701 Golfpark Drive Celebration FL 34747