Application for 2017 Ridge Pass Holder Club

Pass Holder Information (Please Print)

Platinum ☐ Gold ☐ Silver ☐ Copper ☐

Single ☐ Couples ☐

Last Name	First Name	M ☐ F ☐ Gender	Date of birth	Age
			/ /	

Billing Address	City	State	Zip Code

Home Address (If Different)	City	State	Zip Code

( ) Home Phone	( ) Work Phone	( ) Cell Phone

E-Mail Address _____ NCGA # _____

Spouse

Last Name	First Name	M ☐ F ☐ Gender	Date of birth	Age
			/ /	

Billing Information

Payment Plan

I, _____ Authorize The Ridge GC to charge my Credit card account

on _____ for $_____ and _____ for $_____
Date Date

Credit Card # _____ Exp: / Amount $ _____

Check # _____ Amount $ _____

_____ / /
Signature **Date**

For Staff Use Only Received: Gift ☐ Passes ☐