

**IREM COUNTRY CLUB**  
**IREM GOLF ASSOCIATION**

70 Ridgway Drive, Dallas, PA 18612

Pro Shop: 570-675-4653

Office: 570-675-1136 Ext. 241

Fax: 570-675-0793

[www.iremgolf.com](http://www.iremgolf.com)

**2018 Shriner Golf Membership Application**

I hereby make application for membership in the Irem Golf Association and agree, in signing this application, to conform to the constitution, by-laws, articles of incorporation and all rules and regulations of said club.

Name: \_\_\_\_\_ Member #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

For Family Memberships complete the following information:

Spouse's Name: \_\_\_\_\_

Applicant's children under age 18 or a full time student under the age of 23.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

	Cost Yearly
Single age 34 and under	\$1,300.
Single age 35 - 69	\$2,000.
Single age 70 - 79	\$1,800.
Single age 80 and over	\$ 750.
Family	\$2,500.
Family age 70 and over	\$2,200.
Spouse	\$1,000.
Distant Noble	\$1,350.

I understand that I am fully responsible to pay in full the current fee under the terms and conditions as established by the Irem Divan for the above selected membership. Information on payment options available can be obtained by calling the business office at 570-675-1136 ext. 241. A 3% processing fee will be added to dues paid by credit card.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**2018 General Golf Membership Application**

I hereby make application for membership in the Irem Golf Club and agree, in signing this application, to conform to the constitution, by-laws, articles of incorporation and all rules and regulations of said club.

Name: \_\_\_\_\_ Member #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

For Family Memberships complete the following information:

Spouse's Name: \_\_\_\_\_

Applicant's children under age 18 or a full time student under the age of 23.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

	Cost Yearly
Single age 24 and under	\$1,000.
Single age 34 and under	\$1,300.
Single age 35 and over	\$2,300.
Family	\$2,650.
Women	\$1,000.
Junior 18 & under (23 if in college)	\$ 400.

I understand that I am fully responsible to pay in full the current fee under the terms and conditions as established by the Irem Divan for the above selected membership. Information on payment options available can be obtained by calling the business office at 570-675-1136 ext. 241. A 3% processing fee will be added to dues paid by credit card.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ACH Payments

Irem Country Club offers an ACH payment plan for the member's convenience. Dues payments will be deducted from members authorized bank account around the 15<sup>th</sup> of each month for 10 months (Oct 17 thru July 18). An ACH authorization form must be completed and returned to the country club business office.

## 2018 IGA Membership Rates

<u>Category</u>	<u>Individual Rate</u>	<u>Payment</u>
Shriner single	\$2,000	<b>\$200</b>
Shriner single 70+	\$1,800	<b>\$180</b>
Shriner single 80+	\$ 750	<b>\$ 75</b>
Shriner single <35	\$1,300	<b>\$130</b>
Shriner Family	\$2,500	<b>\$250</b>
Shriner Family 70+	\$2,200	<b>\$220</b>
Shriner Distant Noble	\$1,350	<b>\$135</b>
Shriner Spouse	\$1,000	<b>\$100</b>
Shriner single <25	\$1,000	<b>Excluded</b>
<u>GENERAL</u>		
General	\$2,300	<b>\$230</b>
General <35	\$1,300	<b>\$130</b>
General family	\$2,650	<b>\$265</b>
General Woman	\$1,000	<b>\$100</b>
General<25	\$1,000	<b>Excluded</b>
Junior	\$ 400	<b>Excluded</b>

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70 Ridgway Drive

Dallas, PA 18612

Phone: 570-675-4465

Fax: 570-675-0793

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

Member Name: \_\_\_\_\_

Member Number: \_\_\_\_\_

I (we) hereby authorize Irem Country Club hereinafter called Irem C.C., to initiate debit entries to my (our) Checking and/or Savings accounts indicated below at the depository financial institution named below, hereinafter called **DEPOSITORY**, and to debit the same to such account.

Depository Name: \_\_\_\_\_ FNCB Bank \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Shavertown, PA 18708 \_\_\_\_\_

Transit / ABA No: \_\_\_\_\_

Account No: \_\_\_\_\_

Account Type: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

This authority is to remain in full force and effect until Irem C.C. has received written notification from me (either of us) of its termination in such time and in such manner as to afford Irem C.C. and DEPOSITORY a reasonable opportunity to act on it.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Dues category: \_\_\_\_\_ Monthly payment amt: \_\_\_\_\_