2024 Membership Application & Agreement

IRONWOOD

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ALL MEMBERSHIPS ARE 12 MONTH COMMITMENTS, THEN GO MONTH TO MONTH

I / We hereby apply for the following MONTHLY MEMBERSHIP:

Full Family	\$240 monthly
Individual	\$202.80 monthly
Weekday Golf	\$162 monthly
Jr. Executive Family (40 & under)	\$138 monthly
Non-Resident	\$132 monthly
Jr. Youth 18 & under	\$478.80 annually (no charging privileges)
Corporate Annual (inquire about eligibility)	\$8640 annually
Social (Dining, Social Events, Pool, and Court privileges only)	\$114 monthly
Tennis & Pickleball (Courts Access Only)	\$200 yearly

I/we hereby apply for these **OPTIONAL SERVICE PLANS**:

Annual Family Unlimited Plan	\$1530 + TAX \$1611.09
Annual Individual Unlimited Plan	\$1105 + TAX \$1163.57
Monthly Family Unlimited Plan	\$150 + TAX \$157.95
Monthly Individual Unlimited Plan	\$115 + TAX \$121.10
Family Monthly Range Plan	\$35
Individual Monthly Range Plan	\$25
Annual VSGA Handicap Fee	\$35
Family Annual Trail Fee	\$750
Individual Annual Trail Fee	\$500

Applicant Name:			Date of Birth:	
Cell Phone:	Email:			
Mailing Address:				
City:		State:	Zip:	

Spouse's Name:			Date of Birth:		
Cell Phone:	Email:				
Dependent childre	n and grandchildren unde	er age 25:			
Name:			Date of Birth:		
Name:			Date of Birth:		
Name:			Date of Bi	rth:	
Please send staten	nents and notices to eithe	r: 🗆	E-mail address:		
			Paper Copy to:		
	gree that I must furnish a v e Club at Ironwood to chai				cally in my membership file.
🗆 Visa	□ MasterCard □] Discover [] American Express	□ Other	
Name on Card:		Credit Co	ırd #:		Exp. Date:/
Credit Card Billing	Address:				

□ Charge my card automatically

Use my card only if my payment is overdue

I understand that I am signing a 12 month commitment for membership. After the 12 months, I will be a member from month to month. I understand that first month dues must accompany this application. I understand that in order to resign, I must provide a written 30 day notice after which I will be billed only for charges to my account during those 30 days including incidental charges including but not limited to rental fees, merchandise, food, beverages, gratuity and all applicable sales tax. I understand I will receive a monthly statement the first week of each month that includes a \$3 processing fee, and that my credit card will be charged the full balance due on the 10th of that month if I have elected automatic credit card payment. If not set up for automatic credit card payment, I understand that I must pay by check or cash on or before the last day of current billing month or my credit card on file will be charged the full balance due the following day. If I would like to dispute any charges on my statement I must do so before the last day of current billing month. If for any reason my balance is unable to be processed to the credit card I have on file I will be charged a \$25 late fee. If my account becomes 60 days past due, I will be notified in writing that my charging privileges have been suspended and my balance is due. If the past due amount is not paid in full by the third billing date my membership will be terminated and the Club will take legal action if no payment arrangements have been made. If a member drops their membership they are not eligible to join again for 12 months.

Signature:		Date:	
Name Printe	d:		
		CLUB USE ONLY	
	START DATE:	MEMBER #:	

The Club at Ironwood

62 Country Club Circle * Staunton, VA 24401 * P.O. Box 230 Verona, VA 24482-0230 (540) 248-7272