

# The Country Club of Johnston County, Inc.

694 Country Club Road  
Smithfield, North Carolina 27577

## MEMBERSHIP APPLICATION

(1) Date of Application \_\_\_\_\_

(2) Date of Acceptance \_\_\_\_\_

(3) Type of Membership:

Full Member

Junior Member

Tier 1- (Ages 31 - 36)

Tier 2- (Ages 21 - 30)

Social Member

Out Of County Member

Corporate Member (Requires Alternate Application)

Special Member

(4) \_\_\_\_\_

Applicants Last Name

Applicants First Name

Date of Birth

(3) \_\_\_\_\_

Address: Street and Number

City

State

Zip Code

(4) \_\_\_\_\_

Home Phone

Work Phone

Cell Phone

Email Address

(5) \_\_\_\_\_

Name of Spouse

Date of Birth

Email Address

(6) Children:      Name                      Date of Birth                      Name                      Date of Birth

\_\_\_\_\_

\_\_\_\_\_

(7) \_\_\_\_\_

Employer

Position Held

(8) (The Club prefers that account balances be paid by electronic draft in order to save paper work and expense of handling. Please enter the following information:

(9) \_\_\_\_\_

Name of Bank

City

Bank ABA Number:      Checking Account Number

Payment:    Draft on the 10th       Draft on the 17th       Manual Payments

Membership requires one year Minimum. Cancellation after the year requires a 30 day written notice.

By signing below I agree to the codes of conduct and rules mandated by CCJC.

(10) \_\_\_\_\_

Applicant (Signature)

\_\_\_\_\_  
Spouse (Signature)

Revised 3/1/2022