

Application for Membership

Eagle Membership Monthly Dues \$165 Annual Pre-paid \$1850
\$900 Initiation Fee Split over three months.

Double Eagle Membership Monthly Dues \$195 Annual Prepaid \$2140
\$1350 Initiation Fee Split over three months.

Annual
Monthly Dues Individual \$90 Annual Prepaid \$1000 Individual
Monthly Dues \$125 Family Annual Prepaid \$1400 Family

Annual Senior (Monday - Friday)
Monthly Dues Individual \$110 Annual Prepaid \$1220 Individual
Monthly Dues \$150 Family Annual Prepaid \$1670 Family

To enroll in our monthly membership option, you must provide valid banking information for automatic payments.

ACH Bank Draft (Recommended) Direct withdrawal from your checking or savings account

Credit or Debit Card 3.5% convenience fee applies to all card transactions

Payment will be processed on the same date each month. Members are responsible for ensuring sufficient funds are available and for updating payment information as needed.

Primary Member _____ Date of Birth _____

If Family Membership, Please List All Family Members Names and Birth Dates.

Secondary Members _____ Date of Birth _____

Name _____ Date of Birth _____ Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Authorization (Please choose one.)

I agree to the terms and conditions of Membership and hereby authorize Club Management, LLC to charge the following bank account or credit/debit card account for any dues, fees and charges associated with this Membership for a minimum of the initial 12 month term (*subject to rates included in Membership Opportunities effective June 1, 2025*) and understand if payment is denied two times over a six month period due to NSF, my membership will be suspended and I will be required to pay the balance of the year in full to continue membership privileges. Upon completion of the year, I may return to monthly privileges.

I agree to the terms and conditions of Membership and hereby pay Kirkwood National Golf Club the Annual Prepaid fee

After the initial 12 month term, 30 days written notice is required to cancel membership.

Bank Name for ACH _____ Routing # _____ Acct # _____

Name on Card _____

Account Number _____ Exp. Date _____ SIC Code _____

Billing Address (if different from above) _____

City _____ State _____ Zip _____

Authorized Signature _____ Date _____