

GARDNER GOLF COURSE 2025-26 MEMBERSHIP APPLICATION – FALL SPECIAL

The undersigned hereby makes an application for membership at The Gardner Municipal Golf Course. Membership allows for unlimited golf, based upon availability of the golf course & within the **Membership Restrictions** listed below:

<input type="checkbox"/> INDIVIDUAL \$1,250 <input type="checkbox"/> FAMILY \$2,000 <input type="checkbox"/> WEEKDAY INDIVIDUAL \$900 (R) <input type="checkbox"/> WEEKDAY FAMILY \$1,450 (R)	<input type="checkbox"/> YOUNG JR (17 & UNDER BEFORE 7/1/26) \$150 (X) <input type="checkbox"/> JR (18-22 BEFORE 7/1/26) \$375 (X) <input type="checkbox"/> YOUNG ADULT (30 & UNDER BEFORE 7/1/26) \$800 (R) <input type="checkbox"/> SR CITIZEN INDIVIDUAL (62 ON OR BEFORE 7/1/26) \$800 (R) <input type="checkbox"/> SR CITIZEN FAMILY \$1100 (R)	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> WEEKDAYS = CANNOT TEE OFF BETWEEN 4 & 6PM WEEKENDS = CANNOT PLAY BEFORE 2PM <i>*However, may play w/ parent/guardian any time.</i> </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> WEEKDAYS = NO RESTRICTIONS WEEKENDS = CANNOT PLAY BEFORE 1PM </div> </div>
--	--	--

Veterans and Clergy are eligible for 10% off membership prices. Proof of veteran and clergy status must be filed at time of application.

THIS APPLICATION DOES CONSTITUTE A PUBLIC RECORD – PLEASE FILL OUT ALL FIELDS & PRINT LEGIBLY

NAME:		DATE:	/ /
ADDRESS:		D.O.B:	/ /
CITY/STATE/ZIP:		PHONE:	
EMAIL:		(REQUIRED FOR GOLF MAILINGS)	
FAMILY MEMBERSHIP INFORMATION			
SPOUSE:			
CHILD:	AGE:	CHILD:	AGE:
CHILD:	AGE:	CHILD:	AGE:

I HAVE READ & UNDERSTAND THE MEMBERSHIP POLICIES OUTLINED IN PAGE 2 OF THIS APPLICATION:

SIGNATURE OF APPLICANT: _____ **DATE:** _____

SIGNATURE OF JR. MEMBER PARENT/GUARDIAN: _____ **DATE:** _____

PAYMENTS – MAKE CHECKS PAYABLE TO “GARDNER MUNICIPAL G.C.”

AMOUNT PAID: \$	DATE:	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> ONLINE	BAL.DUE:\$
AMOUNT PAID: \$	DATE:	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> ONLINE	BAL.DUE:\$

IF YOU ARE A NEW MEMBER, PLEASE LIST YOUR SPONSOR: _____

SEE PAGE 2 FOR APPLICATION GUIDELINES & MEMBERSHIP POLICIES

1. THIS IS A LEGALLY BINDING CONTRACT

2. Incorrect or false information is subject to suspension & court procedure upon review by the Golf Commission.

3. Dates of Birth for Restricted Memberships must be proven upon request.

***ALL PLAYERS AND OTHER PERSONS AT THE GOLF CLUB, OR ON THE GOLF COURSE,
ASSUME ALL RISK OF INJURY TO THEMSELVES, DAMAGE AND LOSS OF PROPERTY, AND ARE LIABLE FOR
THEIR ACTS TO ALL OTHER PERSONS***

FALL MEMBERSHIP SPECIAL MUST BE PAID IN FULL AT TIME OF APPLICATION.

Membership Refund Policy:

Membership refund requests will be honored based on the following schedule and credited towards your future membership:

By June 1: 75% Credit | By July 1: 50% Credit | By August 1: 25% Credit | After August 1: No Refund/Credit

**AN APPLICATION MUST BE PICKED UP AT THE GOLF SHOP, ROOM 217 IN CITY HALL, OR DOWNLOAD AT
WWW.GARDNERGOLFCOURSE.COM**

**PLEASE SEND YOUR PAYMENT RECEIPT & PAGE 1 OF THIS APPLICATION TO *BERRYD@GARDNER-MA.GOV* OR
DROP OFF IN ROOM 217 OF CITY HALL OR AT THE GOLF SHOP DURING OPERATING HOURS.**

A SIGNED APPLICATION IS REQUIRED BEFORE YOU ARE CONSIDERED ACTIVE.

**WE ARE NOW ACCEPTING ON-LINE PAYMENTS FOR MEMBERSHIPS. ALL ON-LINE PAYMENTS MUST BE PAID NO LATER
THAN SEVEN DAYS PRIOR TO THE DEADLINES LISTED ON PAGE 1.**

TO PAY ONLINE: www.gardner-ma.gov/206/Golf-Course

OR SCAN THE QR CODE:



BRING IN A NEW MEMBER AND GET \$100.00 CREDIT OFF YOUR NEXT MEMBERSHIP!

(JUNIOR MEMBERSHIPS ARE NOT ELIGIBLE FOR REFERRALS)

2024 was the final year of referral check refunds. Sponsors will now receive future credits.