



**Plantation Preserve**

Golf Course & Club

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

Individual Membership     Family Membership     Junior Membership     Range Membership

Member's Name(s): \_\_\_\_\_

Member's Birth Date \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Spouse's Birth Date \_\_\_\_\_

Eligible Dependents (under the age of 24): \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Work: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Alt. Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Medical Condition(s) known (opt): \_\_\_\_\_

**PAYMENT METHOD**

I understand that I am pre-paying my Annual Dues in full for the aforementioned membership for the fee of: \_\_\_\_\_

Bag Storage: \$100.00 per bag (optional): \$ \_\_\_\_\_

Locker: \$60.00 (optional): \$ \_\_\_\_\_

Unlimited Range Ball Program (optional): \$ \_\_\_\_\_

+ 7% Florida Sales Tax: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

**PAYMENT**

Cash     Credit Card (complete below)     Check Bank: \_\_\_\_\_ #: \_\_\_\_\_ Amount: \_\_\_\_\_

Credit Card Information:     VISA     MC     AMEX

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name Printed on Card: \_\_\_\_\_

Signature \_\_\_\_\_



**GENERAL CONTRACT CONDITIONS**

I understand that upon purchase of membership in Plantation Preserve Golf Course & Club, I will abide by the Bylaws of Plantation Preserve Golf Course & Club, and all rules and regulations set forth by the City and its management consultant, Guidant Management Group, LLC.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**ACCEPTANCE OF RISK**

I hereby acknowledge that the use of the Club facilities and any privileges or service incident to Membership is undertaken with knowledge of risk of possible injury. I hereby accept any and all risk of injury that myself, my guests and/or my family may sustain while using the Club facilities or being involved in any event or activity incident to Membership in Plantation Preserve Golf Course & Club. Furthermore, I release, indemnify, and hold harmless the City of Plantation, Guidant Management Group, LLC, their successors and assigns, their respective officials, governing body members, board members, and committee members, directors, officers, partners, shareholders, and employees (herein, the "Indemnitees") from any and all loss, claims, injury, damage or liability sustained or incurred by me, my guests, my family, or all of the foregoing resulting from or arising out of any conduct or event connected with the use of the facilities, except to the extent such loss, claims, injury, damage, or liabilities were proximately caused by the negligence of the Indemnitees.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**BYLAWS**

I hereby acknowledge receipt of Plantation Preserve Golf Course & Club Membership Bylaws and that I have read and understand them and agree to be bound by the terms and conditions thereof as the same may be amended from time to time by the Club.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**CART RELEASE**

I will obey the Preserve's Rules. I am responsible for all persons riding in the Car while it is in my use or possession. I acknowledge that Management may at any time terminate my use of the Golf Car or the Preserve property. I understand there are inherent risks of golf associated with water hazards, weather, environmental or wildlife exposure, errant balls, golf club use, other golfer acts or omissions (including negligent ones), and Car use. For myself and for my children or wards, I release and hold harmless the City and its agents from all damages and claims for death or bodily injury, death, and disease including those caused by the above risks, which might be caused by or suffered in connection with the above risks or our use of the Plantation Preserve. I will pay for (and indemnify the City and its agents against) all damage to the Car, to other property, or to people which is caused by or relates to the use, possession, or operation of the Car by me or by anyone for whom I am responsible. I have a valid driver's license, and I know how to safely operate a Golf Car.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

*For Office Use Only*

Member Name: \_\_\_\_\_ Member ID: \_\_\_\_\_ Date: \_\_\_\_\_

Membership Desired: \_\_\_\_\_ Amount of Membership: \$ \_\_\_\_\_

Bag Storage Fee: \$ \_\_\_\_\_ Locker Fee: \$ \_\_\_\_\_ Handicap Fee: \$ \_\_\_\_\_ Range Program \$ \_\_\_\_\_ Range Booklet \$ \_\_\_\_\_

Tax (7.0%): \$ \_\_\_\_\_