



A Long Tradition - A New Vision - Affordable Private Golf

2010 Junior Membership Application

Name_____ Telephone_____

Address_____ Email_____

City_____ Birth Date_____

State_____ Zip Code _____

Type of membership –please check one:

Junior Membership

Age 12 to 17.....\$600.00

Any age to 17 (*Child of a member*).....\$500.00

Limited Course privileges as defined by the Board of Governors; No ownership or voting rights

I the undersigned, hereby make application for membership in the Maynard Country Club and if accepted, agree to abide by all the rules and policies of the club.

Applicant Signature_____ Date_____

Sponsor_____ Sponsor _____

Please mail check payable to Maynard Country Club to Member Services Committee to Maynard Country Club, P.O. Box 237, Maynard MA 01754 – (978) 897-9885, Ext 6 Visit maynardcc.com

Visa and MasterCard accepted in person at the MCC office.
