

Golf Academy

ACADEMY

Annual Dues: \$1250.00*

- Practice facilities (putting green, driving range and short game area) access after 10:00am
- Member pricing on all instruction
- Up to three rounds per month on the Palmer course:
 - o \$47.50 plus cart fee, Monday through Thursday after 12:00pm
 - o \$67.50 plus cart fee, Friday through Sunday after 12:00pm
- One round per year on the historic Banks course for \$95 plus cart fee
- Dining privileges in the Gatenby Grill (lunch and dinner)
- Access to USGA GHIN Handicap System \$45
- * * * Indoor Practice Facility use is by appointment for lessons only, or select Academy events.

ACADEMY JUNIOR (UP TO AGE 17)

Annual Dues: \$1,000.00*

- Practice facilities (putting green, driving range and short game area) access after 10:00am
- Member pricing on all instruction
- Up to three rounds per month on the Palmer course:
 - o \$37.50 plus cart fee, Monday through Thursday after 12:00pm
 - o \$57.50 plus cart fee, Friday through Sunday after 12:00pm
- One round per year on the historic Banks course for \$95 plus cart fee (accompanied by parent/adult)
- Dining privileges in the Gatenby Grill (lunch and dinner)
- Access to USGA GHIN Handicap System \$45
- * All rates are subject to applicable sales tax.

Please note: Privileged and prices are subject to change at any time at the sole discretion of club management.

* * * Indoor Practice Facility use is by appointment for lessons only, or select Academy events.

Membership Privileges and Duties

Your rights and privileges are limited to the type of Academy Membership listed above. None of the Academy Memberships entitle anyone to free use of either golf course at Forsgate Country Club. Please initial your acknowledgment below to the following:

Ē	If you take a golf cart for the purpose of driving to the practice area on the Palmer Course, that does not entitle you to play golf without payment. A mandatory \$29.75 cart fee plus tax will apply when carts are in use!
	Golf carts must be returned to the Starter Shack 20 minutes prior to sundown. Violation of any of these terms and/or restrictions will be grounds for termination of your membership without a refund.
	Your membership will be auto-renewed each January. If you decide to terminate your membership for the following year, you must put it in writing and send to the Membership Director no later than the last day of the current year. Dues are non-refundable.
	I understand and accept the Rules and Regulations listed above.

For more Forsgate Membership information, please contact Ashley Blair in Membership at 732.656.8922.



Academy Registration Form

· -				
Member Name:				
Address:	ress: City, State, Zip:			
If minor, name or parent/legal guardian:				
Date of Birth:Email:				
Cell Phone:	Home Phone:			
Emergency Contact:	Relationship:			
Membership Type:	Price*:			
*Please note that tax will be added to the list price of y	our membership.			
Assumption of Risk and Release Agreement				
Assumption of Risk: As parent or legal guardian of participal	nt, I am aware that the Activity involves inherent risks, dangers, and hazards that			
can result in serious personal injury or death. I am also aware	that the facilities and/or equipment contain dangers and can cause serious injury			
or death. I and Participant hereby freely agree to assume and	d accept all known and unknown risks of injury arising out of the Activity including			
injury or death that results from Club's negligence, design of	the facility and/or equipment, or from any third party.			
acknowledge that we, on our own behalf and on behalf of the assigns, release, discharge, waive, relinquish, covenant not to costs, liabilities, expenses or judgments whatsoever, including companies, and all their respective officers, directors, agents ("Released Parties") from all liability for any injury, death, lost may result from Club's negligence or willful misconduct of an directly or indirectly out of participating in an event or activity any transportation. It is the intention of the parties hereto the consequences of acts or omission of the Club and Released Formation of the club and Released Formation in the club and Released Fo	erticipant to participate in the Activity, I and Participant understand and expressly to other members of our family, including spouse, parents, children, heirs, and to sue, indemnify and hold harmless from any and all claims, actions, demands, ag attorneys' fees and costs, the Club, its parent company, affiliated or subsidiary storm contractors, employees, heirs, successors, assigns, volunteers and guests as or damage connected in any way whatsoever to participation in Activity that may third party, design of the facility and/or equipment, whether arising either lies or from any third party, whether on or off the Club's premises and including mat I will indemnify and protect the Club and Released Parties from the Parties or any third party (including others who may be participating), who may departies that arose by, through, or under Participant, in whole or in part.			
Property Loss: All personal property brought to the Activity injury to any other third party.	is brought at the sole risk of the Participant as to its theft, damage, or loss or			
Photograph Permission: I give permission for the Club to use include participant's image or voice for purposes of promoting	e, without limitation, photographs, film footage, or tape recordings that may ng the Club's programs.			
	d by the courts having jurisdiction shall be invalid only with respect to such be construed and enforced to the same effect as if such offending provision			
Signature of Member/Legal Guardian:	Date:			
Signature of Membership Director:	Date:			



AUTHORIZATION FORM

Please select one:

Monthly Automatic P	Payment Program					
Delinquent Account Authorization Only (Balances over 30 days past due)						
MEMBER'S NAME		MEMBER NUMBER				
BILLING ADDRESS	atia bank transfer) nlagas n	rovido the following:				
For payments by ACH (automa	atic bank transfer) please p	rovide the following:				
NAME ON ACCOUNT	ABA/ROUTING#	ACCOUNT NUMBER	ACCOUNT TYPE			
For payments by Credit Card p	please provide the following	j :				
NAME ON CREDIT CARD		CARD TYPE				
NAME ON OILEDIT GAILD		CARD THE				
CARD NUMBER		EXPIRATION DATE	CVC #			
I HEREBY authorize the Club to charge any account balance based on the above selection. I agree not to file a chargeback or dispute this transaction with my issuing bank and understand that by doing so I give the Club the right to take legal action. I HEREBY authorize the club to act upon my instruction received by telephone or any other means to charge my credit card account listed above for expenses incurred to my Membership Account made by myself or any other person designated by me for a minimum of one full year and as long as I am a member. I also agree to provide an active bank account or credit card at all times and will notify the club periodically to update my information. I HEREBY ratify any instructions given pursuant to the above authorization and agree that neither the Club nor any of its officers, directors and employees will be liable for any loss, liability, cost or expense for acting upon such instructions believed by it or them to be genuine. Subject to such conditions this authorization will remain in effect until the Club has received written revocation from me. The Club will at all times have the right to refuse to complete any specific transactions for any reason including, but not limited to, improper or incomplete authorization by myself, inadequate credit to pay incurred expenses requested and/or an expired or invalid account number. Furthermore, the Club reserves the right to suspend, alter or terminate the automatic payment program without notice. I agree that the Club will not in any way be liable for any damages or inconvenience to the Member in connection with any such change.						
I understand that Annual dues are subject to change each calendar year.						
I guarantee and warrant that I am the legal cardholder for this credit card or bank account, and that I am legally authorized to enter into this agreement.						
I understand that all credit card payments carry a 2.75% service charge in addition to the amount owed on my monthly member statement. I agree to this additional fee. I further acknowledge that payments by ACH will not carry any additional fees or service charges.						
CARD HOLDER SIGNATURE (Digital Signature NOT accepted)		DATE				