

# 2024 Pine Knolls Membership Application

Full Name \_\_\_\_\_

Spouse \_\_\_\_\_

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

City/State/Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

\_\_\_\_\_ **All-Included Membership: NO GREEN/CART FEE OR RANGE FEE**  
**\$2,000—INDIVIDUAL**  
**\$2,800—COUPLES (Mr. & Mrs.)**

\_\_\_\_\_ **Family Membership: (4 per family) NO GREENS FEE**  
**\$1,800**

\_\_\_\_\_ **Individual Membership: (1 per) NO GREENS FEE**  
**\$900**

**2024 CART FEES**  
**18 holes - \$10 / 9 holes - \$5**  
**18 holes - \$5 / 9 holes - \$2.50 (personal cart only)**

\_\_\_\_\_ **Junior Membership: ( age 17 and under ) - \$450**

**\*\*\* NO WALKING ON WEEKENDS TILL AFTER 12 PM\*\*\***

\_\_\_\_\_ **Adult Driving Range Membership: \$300 (1 per)**

\_\_\_\_\_ **Junior Driving Range Membership: \$250 (1 per)**

\_\_\_\_\_ **Family Driving Range Membership: \$450 (4 per)**

**Name (First & Last )**

**Age**

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Membership Agreement**

**Membership is contingent upon approval that shall be at the Club's sole and absolute discretion.**

**Membership Privileges in the Club / No ownership of club:** The undersigned hereby acknowledges that the Club facilities are owned and operated by the Club and that membership in the Club permits the member to use the facilities, but is not investment in the Club. Membership does not grant a member a vested or prescriptive right to easement to use the facilities of the Club. Membership is non-transferable.

Upon signing this Application for Membership Privileges, the undersigned authorizes the disclosure and release of information to Pine Knolls Golf & Swim Club, the undersigned's qualifications for membership and authorizes those persons or entities herein to furnish information to Pine Knolls Golf & Swim Club. The undersigned understands that acceptance for membership in Pine Knolls Golf & Swim Club. Is subject to approval and payment of the required membership fee, and charges for the duration of the Membership.

I agree to observe proper conduct and be bound by all membership rules. The Club has the right to unilaterally change the rules from time to time. I understand that a violation of such rules may subject my membership to revocation. I also understand that no part of my membership fee is refundable.

**Liability release:** Members, their family members, member's guest by the execution of this agreement, hold harmless and release any liability to Pine Knolls Golf & Swim Club, their owners, officers, employees, agents or representatives, and vendors for any damages or injuries to their person or property. If Applicant is married, signature by spouse is required for family membership.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse \_\_\_\_\_ Date \_\_\_\_\_

Amount paid with application \$ \_\_\_\_\_ Pine Knolls Staff \_\_\_\_\_

Pine Knolls Golf Club 1100 Quail Hollow Rd. Kernersville, NC 27284  
336-993-8300 www.pineknolls.com