



L A P L A Y A
B E A C H & G O L F C L U B

**PROSPECTIVE MEMBER
INFORMATION STATEMENT**

I am interested in acquiring a membership in LaPlaya Beach and Golf Club (the "Club"). For this purpose, I am providing the following information to the club.

PERSONAL

Applicant's Name _____ Preferred Name _____

Birth Date ____/____/____ USGA Handicap _____

Spouse's Name _____ Preferred Name _____

Birth Date ____/____/____ USGA Handicap _____

Primary Mailing Address _____
Number Street City State Zip Code

Primary Residence _____
Number Street City State Zip Code

Other Residence _____
Number Street City State Zip Code

Monthly statements are available to view online. Please provide your email address for notification updates.

Statement Billing Email Address _____

Name of local community _____

Are you year round? _____ Seasonal: From _____ to _____

Telephone

Local Residence (_____) _____ Out of Town (_____) _____

Fax Number (_____) _____

(M) Cell Phone (_____) _____ (F) Cell Phone (_____) _____

(M) Email _____ (F) Email _____

Unmarried children under the age of 23:

Name	Birth Date	Charge Privileges
_____	_____	() Yes No ()
_____	_____	() Yes No ()
_____	_____	() Yes No ()
_____	_____	() Yes No ()
_____	_____	() Yes No ()

Please list children not listed above that are 23 years of age or older, grandchildren, parents and grandparents. Next to their name, please list their relationship. These family members are entitled to a Guest Identification Pass, with authorization, when the member is not present. A nominal daily fee is charged for access to the Club.

First and Last Name	Relationship to Member
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

BUSINESS

Applicant's Company Name _____ Title _____

Business Address _____
Number Street City State Zip Code

Telephone (_____) _____ Years in Present Employment _____ Retired _____

Spouse's Company Name _____ Title _____

Business Address _____
Number Street City State Zip Code

Telephone (_____) _____ Years in Present Employment _____ Retired _____

BANKING

1. _____
Name of Institution Address

Telephone

CLUB REFERENCES

1. _____
Name of Club/Organization Year Accepted

Type Address

Contact Person Present/Former Member

PERSONAL REFERENCES

1. _____
Name Address ()

Years Known Telephone
2. _____
Name Address ()

Years Known Telephone

Referred to club by: _____

Upon signing this Prospective Member Information Statement, I authorize the disclosure and release of information requested by the Club for investigating my qualifications for membership, including without limitation, my credit history, and shall hold the Club harmless for any and all such acts. The undersigned further authorizes those persons or entities set forth in this statement to furnish all information requested by the Club and agrees to hold the Club harmless from any and all such acts.

I understand that membership in the Club is by invitation only, and in order to acquire a membership in the Club, I must be invited for membership. Membership is contingent upon approval by the Club, which approval shall be at its sole and absolute discretion.

The Club will keep all information contained within this Prospective Member Information Statement confidential.

If the person completing this Information Statement is married, the signatures of both spouses are required.

Dated: _____
Signature

Dated: _____
Spouse's Signature

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