



**Timber Ridge  
Golf Club**

RETURN MEMBERSHIP APPLICATIONS WITH PAYMENT TO:  
ATTN: MATT ROGERS  
TIMBER RIDGE GOLF CLUB  
1400 STATE ROUTE 17, LACON, IL 61540

**MEMBERSHIP INFORMATION**

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NAME

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ADDRESS

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CITY

STATE

ZIPCODE

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PHONE

EMAIL

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SPOUSE

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CHILDREN

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CHILDREN UNDER 21

**MEMBERSHIP APPLICATION**

I HEREBY APPLY FOR THE MEMBERSHIP AT TIMBER RIDGE GOLF CLUB.

I AGREE TO ABIDE BY ALL THE BY-LAWS, POLICIES, AND REGULATIONS OF TIMBER RIDGE GOLF CLUB AND ITS MANAGEMENT AND FORFEIT THE BALANCE OF DUES IF THE MEMBERSHIP IS RESIGNED OR TERMINATED.

\*FOOD AND BEVERAGE DISCOUNTS ARE NO LONGER INCLUDED IN GOLF MEMBERSHIPS.

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PRINT

SIGNATURE