



2017 SUMMER MEMBERSHIP APPLICATION

Name: _____

Local Address: _____
STREET CITY STATE ZIP

Billing Address (CHECK ONE): Local Business

Telephone: (LOCAL) _____ Cell: _____

Email Address: _____

Name of Spouse: _____

BUSINESS

Applicant's Occupation: _____ Title: _____

Company Name: _____ Telephone: _____

Address: _____
STREET CITY STATE ZIP

Spouse's Occupation: _____ Title: _____

Company Name: _____ Telephone: _____

Address: _____
STREET CITY STATE ZIP

CHILDREN

Unmarried Children of Applicant Twenty-Two Years of Age or Under Living at Home:

	NAME	DATE OF BIRTH	MALE / FEMALE	ATTENDING SCHOOL
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

INDIAN RIVER CLUB ACQUAINTANCES (If Any)

NAME

1. _____
2. _____
3. _____

OTHER CLUB MEMBERSHIPS (PRESENT AND FORMER, PLEASE LIST ALL)

NAME OF CLUB

ADDRESS

TELEPHONE

1. _____
2. _____

TERMS AND CONDITION OF AGREEMENT AND MEMBERSHIP

1. VERIFICATION OF AGREEMENT.

Upon signing this Application, Applicant and Applicant's Spouse (if any) each authorize the disclosure and release of information to the Club for investigating qualifications for membership, including without limitation, credit histories, and authorize those persons or entities listed herein to furnish information to the Club. Applicant and Applicant's Spouse each agree that all information and communications received by the Club are privileged, confidential and not subject to disclosure to the undersigned or to any other person other than authorized Club personnel. The undersigned each agree never to make demand on the Club or any other person to disclose any of the information or communications to the undersigned, and the undersigned releases the Club and its members, partners, officers, directors, shareholders, employees, representatives, affiliates and agents and any person providing information or communications from any liability in connection therewith.

This Application shall be governed by and construed in accordance with the laws of the State of Florida without regard to principles of conflicts of laws.

If applying for a family membership, the signatures of both spouses are required.

Date: _____, 2017

Applicant

Applicant's Spouse

This Membership Agreement shall not be binding on the Club until signed receipt of the Summer Membership Rules and Regulations, a copy of a valid driver's license, an imprint of a valid credit card (Visa® or MasterCard®), and the acceptance below is signed by the applicant and ratified by the Club.

APPROVED AND ACCEPTED:

**THE NEW INDIAN RIVER CLUB
d/b/a/ INDIAN RIVER CLUB**

By: _____

Date: _____

Name: _____

Title: Director

04/01/17