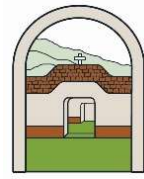




MEMBERSHIP APPLICATION
Please Check One Box



	Platinum	\$475	Initiation fee \$500
	Social	\$175	Initiation fee \$100
1 Year Commitment			

Name: _____ Spouse's Name: _____

Date of Birth _____ Date of Birth _____

Residence Address _____ City _____ Zip _____

Residence Phone _____

E-mail _____ E-mail _____

Cell Phone _____ Cell Phone _____

Please list names and birth dates of all unmarried children up to the age of 23 living at home:

Monthly Dues of \$ _____ Initiation Fee \$ _____

Authorization

I agree to the Terms and Conditions of membership and hereby acknowledge that I am committed for a minimum of the initial 12 month term and month to month thereafter. Either party may cancel the membership after the initial term with 30 days written notice. (Initials required) _____

I hereby authorize The Mission Club and/or La Purisima Golf Course to charge the following credit card account for any Dues, Fees and Charges associated with this membership. ***SEE NOTE BELOW (Initials Required) _____

Type of card: American Express / Visa / MasterCard / Discover / Other

Name on Card _____ Zip Code _____

Card # _____ Exp. _____ Security Code _____

******THERE WILL BE AN ADDITIONAL 3% CHARGE FOR CREDIT CARD PAYMENTS******

Authorized Signature _____ Today's Date _____