Shelter Island Country Club
2023 Membership Application

Contact Information	***Please print clearly***
Name (1)	E-mail (1)
Name (2)	E-mail (2)
Local P.O. Box	Winter P.O. Box or Street Address
SI Post Office or Town and Zip	Town/State/Zip
Phone (1)	Cell Phone (1)
Phone (2)	Cell Phone (2)

Membership Categories and dues for Regular and First Responder/Veteran* (Check all that apply)

Single.....**Reg. ☐ $ 607**	**FR/V ☐ $ 546**
Couples.....**Reg.☐ $ 982**	**FR/V ☐ $ 884**
Seniors over **60:**	
Single..... **Reg.☐ $ 575**	**FR/V ☐ $ 518**
Couples..... **Reg.☐ $ 935**	**FR/V ☐ $ 841**
Family with **Juniors** under **18:**	
Two Parent Players.. **Reg.☐.$ 1,052**	**FR/V ☐ $ 947**
One Parent Player.... **Reg.☐.$ 725**	**FR/V ☐ $ 652**
Junior under 18, solo... Reg.☐.$ 197	**FR/V ☐ $ 177**
Social - No golf benefits	
Single..... **Reg.☐. $ 131**	**FR/V ☐ $ 119**
Couple..... **Reg.☐.$ 197**	**FR/V ☐ $ 177**

Optional Fees:
Member Cart Space Fee.....**☐ $179**
Limited spaces available. Separate usage agreement.

All golf members should have a MGA Handicap Index!
Metropolitan Golf Association Membership Fee:
☐ $38
Please add $38 per player to maintain a MGA Handicap Index to be eligible to play in certain Club Tournaments.

Junior Name(s) & Age(s)

_____

_____

_____

_____

Include contact info if desired.

PLEASE MAKE A DONATION!

I would like to make a Tax Deductable donation for Club operation and golf course maintenance.

Donation Amount:

$_____

Shelter Island Municipal Golf Course, Inc. Board of Trustees thanks you for your generosity!

(501 (C) (3) Designated Charity EIN 83-3886098)

*First Responder and Military Veteran Dues above include a 10 % discount as a thank you for their service. Rates above include New York State and Suffolk County sales tax.

Enclosed Payment for Membership Dues & Donation $_____

Make **checks** payable to: **Shelter Island Municipal Golf Course, Inc**., P.O. Box 852, Shelter Island Heights, NY, 11965

Credit Card Payment Signature: _____

Name on Card: _____

Card #:_____

Billing Postal Code: _____ Exp. Date: Month: ____ Year: ____ Email Credit Card Receipt? Yes____ No_____