



ID#1: _____

ID#2: _____

ID#3: _____

Application for Returning Renters – 2017

Name of Renter #1: _____ D.O.B. _____

Name of Renter #2: _____ D.O.B. _____

Street Address: _____

City: _____ State: _____ Zip: _____

How long at this address? _____

Telephone Number: Cell# _____ Home# _____

Email: _____ Email #2 _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Name of Children	Date of Birth and Age	Gender	Birth Certificate Verified

Nanny: _____

Membership _____

Aide: _____

How did you hear about us? (Please check all that apply)

___ Newspaper (note publication) _____ Website _____

___ Friend _____ Other (please explain) _____

Signature _____

Date _____

Pursuant to its Rules & Regulations, Bay Terrace Country Club, Inc. Reserves the right to deny this application.
FEES ARE NON-REFUNDABLE - THERE IS A \$50.00 RETURN CHECK FEE

Total Cost \$ _____ Amount Received \$ _____ Balance Due \$ _____