

Cortland Country Club Membership Application 2025

Complete application and email to Peter Perkins at: p.c.perkins58@gmail.com

Name:	DOB:			Phone:
Address:	City/State/Zip:			
Email	Employer/Occupation:			
Additional membership	information for family, members, or employee			ove address who will be active ation.
Name	Relationship	DOB	PHONE	EMAIL
Check	DOB necessary to k box below for Member			
Family Golf Classifications	Single Golf Classifications		ial Membership	Other Golf Classifications
Junior Family Associate Family Adult Family Senior	Junior Single Associate Single Adult Single		bhouse Social	Non-Resident Temporary Student Collegiate Limited Play Business
Signature: Were you referred by a curre			ate:	
Official Use Presented to BOG:	_ Approved:We	elcome Packet	Sent: Men	nber Number