



NEWPORT
NATIONAL
Golf Club

Annual Membership Agreement 2016

Name: _____

Date of Birth: _____

Social Security Number: _____

Email: _____

Home Address: _____

Summer Residence: _____

Phone : (____) _____

Phone : (____) _____

Cell Phone : (____) _____

Business Address: _____

Business Phone: _____

Business Fax: _____

Type of Membership Desired: _____ INDIVIDUAL _____ FAMILY*

*Please list family members (Spouse, children and birth dates):

Please Check the Appropriate Field For Your Correspondence:

Mail all billing and correspondence to my: _____ Home or _____ Business



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Payment: Annual dues are due, in full, by December 31, 2016.

Payments should be mailed to:

Newport National Golf Club
324 Mitchell's Lane
Middletown, RI 02842

Upon acceptance of this invitation for annual Membership to Newport National Golf Club, I hereby promise to pay all dues, fees and balances. I understand that my Membership is a commitment for 2016 only, and that each year hereafter I must be invited by Newport National to renew my membership.

By signing this invitation, I agree that I am accountable for the actions of all persons included in my membership as well as any guests that may accompany me to Newport National.

Member Date

Please Mail to:

Newport National Golf Club
324 Mitchell's Lane
Middletown, RI 02842