



Application For Membership
CAMDEN COUNTRY CLUB

111 Knights Hill Road
Camden, SC 29020
Tel: (803) 432-3322
Fax: (803) 432-7131
www.camdencountryclub.com

TYPE OF MEMBERSHIP REQUESTED:

Ross Non-Resident
Junior Executive Voting, Age Sports & Social
Junior, Age

APPLICANT INFORMATION - Please include a 5x7 photo (family or individual photo).

Mr. Mrs. Ms. Miss Dr.

Are you Retired or Active Military? (Photocopy of Military I.D. Required) Active Retired

NAME (If Voting Member, voting privileges will be in the name listed)

(Print) Date of Birth

MAILING ADDRESS CITY STATE ZIP

TELEPHONE Home Work or Mobile

EMAIL ADDRESS Additional email:

OCCUPATION TITLE

BUSINESS NAME & ADDRESS

IF RETIRED, FORMER OCCUPATION

FAMILY MEMBERS WHO WILL BE USING THE CLUB FACILITIES (Dependents must be age 18 or younger or attending college):

SPOUSE'S NAME ANNIVERSARY DATE OF BIRTH

CHILDREN Age Birthdate
Age Birthdate
Age Birthdate
Age Birthdate

APPLICANT'S EDUCATION (include school)

CIVIC, SOCIAL AND PROFESSIONAL AFFILIATIONS (Including other Club Memberships)

Name City Length of Membership

Three rows of blank lines for affiliations.

SPOUSE'S EDUCATION (include school)

SPOUSE'S OCCUPATION/BUSINESS NAME

SPOUSE'S CIVIC, SOCIAL AND PROFESSIONAL AFFILIATIONS

Three rows of blank lines for spouse's affiliations.

APPLICANT'S SIGNATURE

DATE

Signature of Three (3) Sponsors

(Please Print Sponsors' Names)

Primary:

Primary:

Blank line for sponsor signature.

Blank line for sponsor name.

Blank line for sponsor signature.

Blank line for sponsor name.

Please return to Camden CC, 111 Knights Hill Rd., Camden, SC 29020 or Via Fax 803-432-7131

Date Approved: