

ADULT ANNUAL GREENS FEE PASS APPLICATION

\$ 200.00

Please fill in the information below. Attach a check made payable to PEASE GOLF COURSE for \$200.00. Sign the form and return it to the address below.

NAME: _____ DATE: _____

ADDRESS: _____

PHONE:(HOME) _____ (BUS.) _____ EXT. _____

PEASE GOLF COURSE REQUIRES THE MANDATORY USE OF SOFT SPIKES.

I understand that my application for an annual pass will be placed on a waiting list from which names will be taken as openings become available. I understand that this list is on a "first come, first served basis".

Your check will be deposited upon receipt. If called, the balance of the current fees at that time, will be due by the end of the month when called. Playing privileges do not start until the full amount has been paid. If for any reason you decide not to become a pass holder, your deposit may be refunded to you with an administration fee of \$ 25.00 deducted.

I understand that the pass is for one golfing season only and may not be available to me in succeeding years.

I understand that payment of this fee entitles me to play 18 holes a day when the course is open to general play, limited only by the availability of a starting time. Starting times will be available to me in the same manner as for any other individual according to the schedules established by the Pease Golf Course Management.

I understand that I must adhere to standards of conduct and attire as established by the Management and that failure to do so may result in this pass being revoked or restricted.

I understand that this pass fee is non-refundable once the pass is issued and that the pass is non-transferable.

SIGNED: _____

Please SIGN and return this application along with the \$ 200.00.

IF YOU WISH A RECEIPT, SEND A SELF-ADDRESSED, STAMPED ENVELOPE.

**SEND TO: PEASE GOLF COURSE
200 GRAFTON ROAD
PORTSMOUTH NH 03801**