



1895
Van Schaick Island Country Club
Cohoes, New York

201 CONTINENTAL AVENUE – PO BOX 104
COHOES, NY 12047
(518) 237-0145 FAX (518) 233-7263
WWW.VSICC.NET

APPLICATION FOR MEMBERSHIP

APPLICANT NAME: _____ DOB (JR CATEGORIES ONLY): ____ / ____ / ____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

TYPE OF MEMBERSHIP REQUESTED: _____ EMAIL: _____
(See list of current membership categories)

OCCUPATION: _____ EMPLOYER: _____

BUSINESS PHONE #: _____ BANK REFERENCE: _____

ADDRESS: _____

LAST CLUB AFFILIATION: _____

GHIN NUMBER (IF KNOWN): _____ 18 HOLE HANDICAP: _____

HOW DID YOU HEAR ABOUT VSICC: TV AD RADIO AD NEWSPAPER AD VSICC Website
(please check all that apply) OTHER _____

MEMBER(S) REFERENCE: _____

FAMILY MEMBERSHIPS ONLY

SPOUSE or PARTNER'S NAME: _____

CHILDREN: _____ DATE OF BIRTH: ____ / ____ / ____

_____ DATE OF BIRTH: ____ / ____ / ____

_____ DATE OF BIRTH: ____ / ____ / ____

MAIL TO THE ATTENTION OF MEMBERSHIP CHAIRPERSON

Membership to Van Schaick Island Country Club is provisional pending formal application approval by the Board of Directors.

Charges for any services of Van Schaick Country Club, including but not limited to membership dues, food and bar bills, and greens fees, are due and payable immediately upon presentation. All dues are annualized and are payable monthly. All charges shall be considered past due thirty days after they are presented for payment and shall be charged a 5% penalty per month for any outstanding balance.

If charges remain unpaid after ninety days, they shall promptly thereafter be sent for collections. All past due charges sent for collections shall be subject to reasonable collection costs, as well as, legal costs and attorney's fees.

Reentry into membership shall be considered only upon the payment in full of any and all past due charges.

Applicant's Signature

Parent / Guardian Signature (Required for Junior members)

INTERNAL USE ONLY

APPLICATION RECEIVED BY: _____

DATE: _____