

# HOODKROFT COUNTRY CLUB

P.O. Box 266  
Derry, NH 03038-0266  
603-434-0651  
www.hoodkroftcc.com

## **2023 Preferred Players Club Application**

**\$600.00 Season – Please make checks payable to the Hoodkroft Country Club if applicable.**

Please fill out the following:

I. Name \_\_\_\_\_  
First MI Last

II. Mailing Address

Street City State Zip

Telephone # \_\_\_\_\_ E-Mail (required): \_\_\_\_\_

III. Current GHIN # \_\_\_\_\_ Local # \_\_\_\_\_

IV. **Emergency Contact's Name and Phone Number:** \_\_\_\_\_

**\* Current rates apply to 2023 Season only.**

- \$5.00 off 9 Hole Green Fees Full Rate
- \$9.00 off 18 Hole Green Fees Full Rate
- Includes GHIN Handicap
- Eligible to Play in Member Tournaments

I shall be personally responsible and liable for the conduct and acts of my family and guests while they are at Hoodkroft Country Club, and I shall be held responsible for infractions by them of the terms of this application and the published rules of the Club. I understand that the Hoodkroft golfing **season runs from April 1<sup>st</sup> and November 30<sup>th</sup> of each year.**

In the event that my membership is suspended or terminated for infractions of the published rules or for breach of the terms of this application, it is understood that I shall not be entitled to a refund of my fees for the period of such suspension, nor shall I be entitled to a refund of the fee in the event of termination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date