

Membership Application

Order online at www.BirkdaleGolfCard.com

NO GREEN FEES!
SIGN UP NOW FOR ONLY \$35
PLAY OVER 500 ROUNDS OF GOLF

Today's Date _____

Cardholder Name Dr. Mr. Mrs. Ms. Rev. (circle one)

LAST

FIRST

MIDDLE

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

New Member Renewal (Member # _____)

Optional

Cost: \$38.28 – one-year membership
includes N.C. sales tax and shipping

Check Enclosed Payable to Birkdale Golf Card

Charge my credit card MasterCard VISA

Account # _____

Expiration Date _____

Signature _____

Give the Gift of a Birkdale Golf Card!

Sender's Name _____

LAST

FIRST

MIDDLE

Address _____

City _____ State _____ Zip _____

Phone (sender) _____

Mail gift to sender's address Mail gift to member

MAIL TO: Birkdale Golf Card
P.O. Box 98325
Raleigh, NC 27624-8325

Copies of this application are acceptable.
Order by phone (919) 846-5382 or 1-800-238-5382
Order by FAX (919) 846-1543
Order online at www.Birkdalegolfcard.com
Please allow 1 week for delivery

OFFICE USE ONLY

Source _____ Mem # _____

Paid _____ Expires _____