THE TWINEAGLES CLUB, INC.

MEMBERSHIPAGREEMENT

I. INFORMATION

PERSONAL

Applicant's Name	
	Birth Date
Spouse's Name	Birth Date
	Anniversary Date
Title, if any (e.g. Dr., Hon.): Applicant:	Spouse:
TwinEagles Address	
Out of Town Address	
Billing Address	
Club Communications Address	
Telephone: Applicant's Cell ()	Spouse Cell Phone ()
Applicant's E-mail Address	Fax Number ()
Spouse E-mail Address	
Unmarried children under the age of 23 living at ho	me or attending school full time:
Name	Birth Date Charge Privileges
	Yes 🗖 No 🗖
	Yes 🗖 No 🗖
	Yes 🗖 No 🗖

Extended family members (children not listed above, parents, grandparents and grandchildren and greatgrandchildren who will have extended family privileges):

Name	Relationship
1 2.	· · · · · · · · · · · · · · · · · · ·
3.	
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8	·

BUSINESS

Applicant's Company Name		Title		
Business Address				
Telephone ()	Years in Present Employment	□ Retired		
Fax Number ()	E-mail Address	Website		
Spouse's Company Name		Title		
Spouse's Business Address				
Telephone ()	Years in Present Employment	□ Retired		
Fax Number ()	E-mail Address	Website		
BANKING RELATIONS				
1. Name of Institution	Address			
Officer to Contact	Telephone ()			
2. Name of Institution	Address			
Officer to Contact	Telephone ()			
PR	IOR GOLF AND OTHER CLUBS			
1. Name of Club/Organization		Year Accepted		
Туре	Address			
Telephone () Contact Person		Present Member		
2. Name of Club/Organization Year Accepted		Year Accepted		
Туре	Address			
Telephone ()	Contact Person 🛛 Present Member			
EMER	GENCY CONTACT INFORMATION			
In the event of an emergency, please	contact the following person(s):			
Primary Contact NameRelationship				
Work Number	Home Number			
econdary Contact NameRelationship				
Work Number	mberHome Number			

II. ACQUISITION OF MEMBERSHIP

I hereby apply for the following category of membership in The TwinEagles Club, Inc. (the "Club"):

MEMBERSHIP CATEGORY

- **G** Full Golf Membership
- □ Sports Membership
- Social Membership

I am acquiring my membership pursuant to a transfer of membership pursuant to the Membership Plan. I agree to pay with this Membership Agreement a transfer fee to acquire my membership in the amount of \$3,500 (paid as part of closing). I understand and agree that I will not be entitled to a refund of the transfer fee under any circumstances, including but not limited to upon transfer of my membership or upon my resignation, death or disability, except as set forth in this Section II.

Membership is contingent upon approval by the Club, which approval shall be at its discretion. Upon signing this Membership Agreement, I authorize the disclosure and release of information to the Club for investigating my qualifications for membership, including my credit history and law enforcement records, and agree to hold the Club harmless from any and all such acts. If membership in the Club is not approved, I shall receive a refund of the transfer fee paid by me.

III. PAYMENT OF DUES, CAPITAL CHARGES, FEES AND CHARGES

I hereby agree to pay to the Club the membership dues, capital charge, fees and charges, including any applicable sales tax, for the category of membership selected, and fees and charges incurred by me, my family and guest in connection with my memberships. The amounts of dues, fees and charges are subject to change.

Club accounts are due and payable upon receipt of the monthly statement. All past due accounts are subject to interest charges as set forth in the Club Rules and Regulations and the Bylaws. All costs and expenses incurred by the Club in the collection of any amounts not paid when due, including but not limited to court costs and reasonable attorneys' fees, whether at the trial or appellate level, shall be my obligation and shall be due and payable on demand.

IV. MEMBERSHIP DOCUMENTS

I hereby acknowledge receipt of Membership Plans, Articles of Incorporation, Bylaws and Rules and Regulations of the Club ("Membership Documents") and that I have read and understand them, and agree to be bound by the terms and conditions thereof as the same may be amended from time to time by the Club. I further acknowledge that I am not relying on any oral representations in acquiring a membership in the Club. I agree to fully substitute the membership rights privileges acquired pursuant to the Membership Documents for any present or prior rights in or use of the Club Facilities. Capitalized terms not defined in this Membership Agreement shall have the meanings as described to them in the Membership Documents.

I have obtained all information that I believe necessary to my decision to execute this Membership Agreement. I further acknowledge that I have the right to consult with an attorney in connection with the execution of this Membership Agreement, and that I have consulted with an attorney to the extent I believe such advice is necessary. I further acknowledge that any dispute in connection with membership privileges at the Club or related to the Membership Documents shall be subject to binding arbitration in accordance with the Membership Documents.

V. INDEMNIFICATION

I hereby acknowledge that the use of the Club Facilities and any privilege or service incident to membership is undertaken with knowledge of risk of possible injury. I hereby accept any and all risk of injury to myself, my guests and my family sustained while using the Club Facilities or while involved in any event or activity incident to membership in the Club. I agree to release and hold The TwinEagles Club, Inc. and its employees, officers, directors, committee members, agents, and members harmless in accordance with the provisions of the Rules and Regulations of the Club.

VI. MISCELLANEOUS

This Membership Agreement shall be governed by and construed and enforced in accordance with the laws of the State of Florida without giving effect to principles of conflicts of law.

If the prospective member is married, the signatures of both spouses are required.

Dated:	, 20	
		Applicant's Signature
Dated:	, 20	
		Spouse's Signature
		This agreement must be received by the Club SEVEN (7) DAYS PRIOR to the closing of the residence.

This Membership Agreement shall not be binding on the Club until the acceptance below is signed.

THE TWINEAGLES CLUB, INC., d/b/a THE TWINEAGLES CLUB

By:

Authorized Representative

Dated: _____

THE TWINEAGLES CLUB 11725 TWINEAGLES BOULEVARD NAPLES, FLORIDA 34120 (239) 354-1700

FOR OFFICE USE ONLY, DO NOT WRITE BELOW THIS LINE			
NEW MEMBER DATA:			
NAME:	ID#:		
APPROVED AND ACCEPTED (ENROLLMENT DATE):			
NOTES:			