

**CITY OF LAKE CHARLES
MALLARD COVE GOLF COURSE
ANNUAL PASS APPLICATION**

Application is hereby submitted for the purchase of an Annual Single or Family Green Fee Pass, which entitles the undersigned to play golf at Mallard Cove Golf Course from _____20__ to March 31, 20__ under the following conditions:

1. That the golf course is open for play (Mallard Cove management reserves the right to close the course due to weather conditions, course maintenance, tournaments, and such).
2. No outside alcoholic beverages allowed to be brought onto the premises, in **accordance with City Ordinance #15-69.**
3. Golf course policies must be adhered to at all times. *(Including etiquette, rules of golf and handicap flags)*
4. Family plans shall consist of husband/wife and/or children 21 years of age or younger, living at home.
5. There will be no refunds of payments or transfers allowed of Annual Pass, *regardless of number of rounds played.*
6. *If application for pass is made after June 1, pass will be pro-rated per schedule.*
7. *If split bill is requested the following requirements must be met:*

1st payment:	60% or more REQUIRED
2nd payment:	<i>Balance due on or before September 1st. If full balance is not received by this date, green fees will be charged and will not be deducted from balance due. Application for new pass will not be accepted until full payment is made on this contract.</i>

I HAVE READ, UNDERSTAND, AND WILL ADHERE TO ALL POLICIES SET FORTH IN THIS AGREEMENT. Any Violation can result in termination of agreement with no refund.

**Signature: _____

Single	Family	Single Over 60	Family Over 60
\$807.30	\$1010.00	\$605.50	\$807.30

Holidays: New Years Day, Martin Luther King, Mardi Gras, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day (closed) and Christmas Day (closed).

Name: _____ Name and Age of Family Member(s) if applicable _____

Address: _____

City & State: _____

Zip Code _____

Telephone # _____

D.O.B. _____

E-mail address _____

CONTRACT ACCEPTED BY: _____ AMOUNT PD: \$ _____ DATE: _____

Member ID # _____ Balance Due: \$ _____