

# Splash Membership

## 2023

Welcome to our new and improved seasonal pool membership we call SPLASH! This new membership includes **ALL** of the privileges afforded a regular Social member at Houndslake CC for Pool Season.

These include the following:

- Member's Guests are allowed. \$5.00 fee for each guest
- Dining privileges at Pub and Dining room
- Reduced rates on golf
- Net Center privileges with court fees
- Save on Non-member fee for HLCC swim team
- One free month if you convert to one of the regular memberships at HCC after season end
- **\$395** plus tax

### Pool Season 2023

Pool Opening is currently projected to be Friday May 26th  
Pool Closing is currently projected to be Saturday September 30th

Splash Membership # \_\_\_\_\_

**HOUNDSLAKE COUNTRY CLUB MEMBERSHIP APPLICATION  
PERSONAL INFORMATION**

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please provide email address for monthly statements and email blasts for Events**

**EMAIL:** \_\_\_\_\_

**SPOUSE/SIGNIFICANT OTHER INFORMATION**

Name: \_\_\_\_\_

EMAIL: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

**DEPENDENT INFORMATION**

Unmarried Dependent Children 22 years of age and under and living at home or attending college full time without a separate source of income are eligible for membership privileges.

Name(s)	Date of Birth	Sex	Charge Privileges
_____	____/____/____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no
_____	____/____/____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no
_____	____/____/____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no
_____	____/____/____	_____	<input type="checkbox"/> yes <input type="checkbox"/> no

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse/Significant Other Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Credit Card Authorization Form

Please complete all fields. By signing the form, I authorize Houndslake Seawell Golf Company LLC  
(aka Houndslake Country Club) to debit my account for my monthly dues, as well as any charges  
made to my account.

<b>Credit Card Information</b>
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX  <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____
CVV2 (3 digit code on back or 4 digit on front for American Express)_____
Cardholder Billing Address : _____

*I, \_\_\_\_\_, authorize  
to charge my credit card above for agreed upon purchases. I understand that my  
information will be saved to file for future transactions on my account.*

\_\_\_\_\_ *Card Holder Signature*    \_\_\_\_\_ *Date*

*By signing this form, I authorize the above-named business to charge my credit card indicated in this authorization form. I certify that I am the authorized user of this credit card and that I will not dispute the payment with my credit card company. I understand that the payment is non-refundable.*