



18485 Bethpage Drive, Lewes, DE 19958 | Phone: 302-703-6662 | Fax: 302-347-8278
www.AmericanClassicGolf.com

PUBLIC MEMBERSHIP APPLICATION

DATE: _____

NAME: _____ MALE: ___ FEMALE: ___

NAME: _____ MALE: ___ FEMALE: ___

MEMBERSHIP TYPE: SINGLE: ___ FAMILY OF TWO: ___

MEMBERSHIP CATEGORY: YEARLY: ___ MONTHLY: ___ AMOUNT OF MONTHS (*Monthly Only*): ___

ADDRESS: _____ APT #: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ EMAIL: _____

SIGNATURE: _____

PAYMENT OPTIONS

PAY BY CHECK:

Please make your check payable to: American Classic Golf Club, LLC
1845 Bethpage Drive, Unit 1, Lewes, DE 19958

PAY BY CREDIT/DEBIT CARD:

CARD TYPE: ___ Visa ___ MasterCard

CARD #: _____ EXP. DATE: ___/___ AMOUNT: \$ _____

Credit/debit card billing address same as above: Yes No

BILLING ADDRESS: _____ APT #: _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE: _____ DATE: _____