

LAKE BARRINGTON SHORES GOLF CLUB
2021 MEMBERSHIP APPLICATION

Member # _____ Name _____ Spouse _____

Mailing Address _____ Home Phone _____ Cell _____

City _____ State _____ Zip _____ E-mail _____
(Print Clearly)

Valid Credit Card: Type _____ CC# _____ Exp. Date _____ Security Code _____

Member Referral (if applicable):

All golf memberships include use of practice facilities including Putting, Chipping and Driving Ranges as well as 14 day advance tee times.

SILVER MEMBERSHIP - Green & Cart Fees Additional

SINGLE \$500 COUPLE \$800

SEASONAL OPTIONS: Club Storage \$95.00 Locker Rental \$95.00 Locker & Club Storage \$175.00

I hereby make application for membership at Lake Barrington Shores Golf Club. If approved, I agree to comply with the attached 2021 Rules & Regulation.

Date _____ Signature of Applicant _____

Date _____ Signature of Spouse (if husband/wife or family membership) _____

(Non-resident vehicle stickers and can be picked up at Pro Shop)

Lake Barrington Shores Golf Club ♦ 40 Shoreline Rd. ♦ Barrington, IL 60010 ♦ 847-382-4240 ext 16
www.lbsgolf.com ♦ E-mail to david.lbsgolf@gmail.com or Fax to 847-382-4319