

Business Membership Application

Business Name:		
Address:		
City:	State:	Zip:
Contact Person:		
Phone Number:		
Email:		
Option 1: \$1000: 50 Golf Passes. Each valid		ne week. <i>Expire 12.31.2022</i>
Option 2: \$1850: 50 Golf Passes. Each valid		day of the week. <i>Expire 12.31.2022</i>
Supplemental Cards may be cards up front with the inition	-	or 2. You may purchase supplemental season.
Supplemental Option 1 20 Golf Passes. Each valid		ne week. <i>Expire 12.31.2022</i>
Supplemental Option 2 20 Golf Passes. Each valid		day of the week. <i>Expire 12.31.2022</i>
Signature:		Date:

Remit Application with payment to:

Stagg Hill Golf Club Attn: Business Membership 4441 Stagg Hill Road Manhattan, KS. 66502