



Annual Dues

2024 - WHISPERING CREEK



ANNUAL DUES OPTIONS

	YEARLY/MONTHLY	SPOUSE MONTHLY
Membership w/ Trail Fee	\$2200/\$245	\$300
Membership w/ Trail Fee & Cart Storage	\$2350/\$261	\$317
Membership w/ Club Cart Rental	\$2500/\$278	\$333
35 & Under Membership w/ Trail Fee	\$1500/\$167	\$222
35 & Under w/ Trail Fee & Cart Storage	\$1650/\$184	\$239
35 & Under w/ Club Cart Rental	\$1850/\$206	\$261

NEW FOR 2024!

	YEARLY/MONTHLY	SPOUSE MONTHLY
Senior Weekday Membership (65+) w/ Trail Fee	\$1750/\$195	\$250
Senior Weekday Membership (65+) w/ Trail Fee & Cart Storage	\$1900/\$211	\$267
Senior Weekday Membership (65+) w/ Club Cart Rental	\$2050/\$228	\$283
Junior Membership (21 & Under) Walking Membership	\$500/\$50	

NEW FOR 2024!

Unlimited Single Range Pass	\$300
Unlimited Family Range Pass	\$400
Unlimited Junior (21 & Under) Range Pass	\$200

All Memberships are Individual Memberships. You may add Additional Family Dependents. **Add Spouse \$500 Additional Dependents \$100**

Dependents are spouses or partners, and children living at home or in school under the age 24

MEMBERSHIPS INCLUDE:

Unlimited use of the Golf Course, 7-day Advance Tee Times, 20% off Banquet Rental, Permanent Tee Time Availability, Preferred Guest Rates, Reduced Fees on Events, and 10% off all purchases in the golf shop.

ADDITIONAL INFORMATION

If Paying in full, all Dues for the 2024 Season are due by April 1st, 2024 *If Dues are not paid in full or monthly payments arranged will charge a 2% fee every month until the dues are paid.*

All Monthly Payment plans are there for your convenience. You are required to pay for the entire 2024 season by December 31st, 2024

All payments are plus tax.

All alcoholic beverages must be purchased at Whispering Creek. *Any member not following this rule may have their membership suspended or canceled.*

Credit Card on File / Monthly Billing

We do require a credit card on file for all members this is used for any member balances due at the end of the month.

Member Name _____	DOB _____
Address _____	
City _____	State _____ Zip _____
Cell# _____	
Email _____	
Spouse's Name _____	DOB _____
Cell# _____	Email _____
Dependent #1 _____	Age _____
Dependent#2 _____	Age _____
Signature _____	Date _____