

MILFORD COUNTRY CLUB
3A Country Club Lane, Milford, MA. 01757

Phone: (508) 478-1250

Fax: (508) 478-3672



GOLF SEASON FOR 2019/ PAR 3 EXECUTIVE COURSE

OPEN HOUSE KICK OFF – sponsored by the Golf Committee!

DATE: Saturday, April 6, 2019

TIME: 10:00 – 2:00 p.m.

PLACE: MILFORD COUNTRY CLUB/OFFICE.

**At this time, please bring in your “2018” golf tags in exchange for the 2019’s.*

Coffee and pastry will be served!

If you have a friend or relative that would like to become a member, bring them along!

When on the golf course, remember that your tag and your guest’s tags must be displayed on your bags at all times! If you do not have your tag while playing on the course, you will be asked to leave the course.

If you are buying an outside membership, please be aware the membership is for your leisure only and you are not allowed to bring a guest with you.

For your enjoyment and to protect the value of your membership, please observe the Milford Country club Golf Course rules that are enclosed. Please abide by the rules while on the golf course.

Any member that does not comply with these rules may be subject to losing their golfing privileges.

Please see page 2 for our membership application

- *We are continuing the Wednesday night league which has been a huge success.*
 - *The Golf League starts April 3, 2019.*
 - *The league meets at 5:00p.m in the Clubhouse*
- *A small donation will enable us to continue our Wednesday night league!*

If you have any questions, please feel free to call

Rachel Schube: 508-478-1250

E-Mail @ Rachel.schube@fsresidential.com

Dues for 2018 season must be paid in full before golf tags can be picked up.

Full Season Membership:

Adult Memberships (must be at least 18 years old)

Individual.....\$350.00/year

Family Membership (2 tags)...\$500.00/year

Junior golfer (must be 12 to 18 years old)

\$150.00 each - only available as addition to an adult membership and may only play when supervised by an adult member

Wednesday night league: \$150.00 non-resident.

MEMBERSHIP APPLICATION

Primary Member Name: _____

Address: _____

E-mail address: _____

Telephone: (day) _____ (evening) _____

Vehicle License # _____ Make/Model: _____

Secondary Adult Name: _____

Junior golfer's name: _____ Age: _____

Junior golfer's name: _____ Age: _____

Junior golfer's name: _____ Age: _____

OFFICE USE ONLY

Tag # or #'s _____ Issued to: _____

MCCT official _____ Date: _____

Received \$ _____

PLEASE RETURN COMPLETED FORM TO:

Milford Country Club

3A Country Club Lane

Milford, MA. 01757

or by Email: Rachel.schube@fsresidential.com