



Application for Membership

PLEASE COMPLETE ALL INFORMATION REQUESTED BELOW AS APPLICABLE

Member Information

Name of Member Mr. Mrs. Ms. Dr. _____

Date of Birth _____

Company Name _____ Position _____ Occupation _____

Work Address: _____ Home Address: _____

Work Phone: _____ Home Phone: _____

Fax Number: _____ Cell Phone: _____

Work E-mail: _____ Home E-mail: _____

Would you like to get our lunch buffet menu via e-mail? If so, what e-mail _____

Spouse Information

Name of Spouse Mr. Mrs. Ms. Dr. _____

Date of Birth _____ Wedding Date _____

Company Name _____ Position _____ Occupation _____

Work Address _____

Work Phone: _____ Fax Number: _____ Cell Phone: _____

Work e-mail: _____

Dependent Information

Dependent's Name	Gender	Date of Birth	Dependent's Name	Gender	Date of Birth
1. _____	_____	_____	2. _____	_____	_____
3. _____	_____	_____	4. _____	_____	_____

References (other than sponsor)

Address

Telephone

1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Other Club Affiliations: 1. _____ 2. _____ 3. _____

TERMS OF MEMBERSHIP IN THE WALDEN CLUB

Initiation Fee

Membership applications must be accompanied by a \$1000 Initiation Fee or \$500 for renewing Members. If no Initiation Fee is attached, a 2 year obligation to the Membership will be honored by the Member in lieu of the Initiation Fee. Rejoining Members are subject to a \$500 Initiation Fee or 1 year commitment to the Membership.

Payment on Account

Payment on account is due on receipt of the monthly statement. If payment is not received by the 15th of the same month, we require a backup payment source. The bank account or credit card will be charged for the unpaid balance of the 16th if payment has not already been received. If the Club is unable to charge the backup payment source, the account will be subject to a late charge of 10% of the past due balance. Payments on delinquent accounts apply first to reduce late charges, then to accrued dues, then to food and beverage charges, then to any other charges. Monthly dues are subject to change from time to time. After ninety days (90) of nonpayment, the Member's account will be terminated and the case will be turned over to collections. The undersigned agrees to pay all reasonable attorney fees, investigator fees and costs in the event this account is turned over for collection. The membership card shall remain the property of the Club at all times.

Please send my monthly statements to (choose one): Home Member's Business Spouse's Business E-mail

If E-mail was selected please list E-mail address to send statements to _____

Payment Options (You must select one option and furnish us with all requested information)

I will pay the balance due by check prior to the 15th. I understand that my backup payment source will be charged for any remaining balance on the 16th. My backup payment source is:

MC VISA AMEX

Credit Card/Account # _____ Expiration _____ 3 or 4 digit pin _____

I would prefer to pay my balance automatically by credit card

MC VISA AMEX

Credit Card/Account # _____ Expiration _____ 3 or 4 digit pin _____

I would prefer to pay my balance automatically by ACH Bank draft. Please debit my bank account for my balance due
(Please attach a voided check on the account you wish charged)

Resignation

Membership in The Walden Club is continuous and requires no annual renewal. It is agreed that a Member may resign from the Club by giving written notice to the Club (except where otherwise obligated for a specific time). Receipt of such notice must be reflected in the Club's records. A Member's copy of such a letter after the fact carries no meaning. The effective date of resignation will be the date the Club receives the Member's written notice. All accrued dues and other charges for which the Member is liable are due upon the date of resignation.

Acceptance

I hereby accept my sponsor's invitation to Membership in The Walden Club. I also agree to conform to and be bound by the Bylaws and Club Rules as they may be amended from time to time.

Membership Applicant Signature _____ Date _____

My Member Sponsor Is: _____

This section to be completed by Walden Club staff

Member Number Assigned _____ Membership Category _____ Monthly Dues _____

Application Accepted By _____ Application Approved _____