

ASSOCIATE MEMBERSHIP NEW OR RENEWAL APPLICATION—SEVEN DEVILS RESORT CLUB—2022

NAME OF MEMBER (1) _____ MEMBER (2) _____

NAMES OF DEPENDENT CHILDREN LIVING FULL OR PART-TIME IN YOUR HOME:

ADDRESS IN 7D AREA (with zip code): _____

NC LANDLINE: _____ MEMBER (1) CELL _____ MEMBER (2) CELL _____

MEMBER (1) EMAIL: _____ MEMBER (2) EMAIL _____

OTHER ADDRESS: _____ OTHER LANDLINE: _____

STATE / ZIP: _____

ASSOCIATE MEMBER DUES (RENT in 7D or surrounding area)

YEARLY DUES:	AMOUNT PAID	or PART TIME (4 MONTHS OR LESS)	AMOUNT PAID
FT FAMILY \$475	_____	1ST MONTH \$125	_____
OR FT TIME SINGLE \$237.50	_____	# ADDTL MONTHS (____) X \$100 per MONTH	_____
			TOTAL DUES (1) _____

OTHER FEES (OPTIONAL):

AMOUNT PAID

GOLF GROUP MEMBERSHIP: MEMBER (1) YES or NO	HANDICAP YES or NO	MEMBER (2) YES or NO	HANDICAP YES or NO
	IF YES, HDCP is _____		IF YES, HDCP is _____
GOLF FEE \$50 per golfer _____		FAMILY FISHING LICENSE \$40 _____	
ANNUAL LIQUOR LOCKER FEE \$10 _____			
LIFETIME LIQUOR LOCKER FEE \$50 _____			TOTAL OTHER FEES (2) _____

REMIT TO: Seven Devils Resort Club or ZELLE Pay to Seven Devils Resort Club using 904-517-9898 and **GRAND TOTAL (1+2)** _____

PO Box 2185 Banner Elk NC 28604 Scan app to jstr8iff@gmail.com

SIGNATURE(S): _____