

2026 NEW RICHMOND GOLF CLUB MEMBERSHIP APPLICATION

NAME(S) _____

ADDRESS: _____ CITY: _____ STATE: __ ZIP: _____

CELL PHONE: _____ OTHER PHONE: _____

*By providing your cell phone number you agree to accept text messages from NRGC.

EMAIL ADDRESS(ES): _____ YEAR JOINED NRGC: _____

MEMBERSHIP Type: (circle applicable)

*Please enter
amounts below
from rate*

<u>Course</u>	<u>Residency</u>	<u>Single/Couple</u>	<u>Gold/Regular</u>	<u>Type</u>			\$
Old Course	Resident	Single	Gold	Associate	College Junior		_____
Links	Non-Resident	Couple	Regular	100 Club		Regular	Gold

DEPENDENTS (names and ages below)	17 and under	# _____	@ \$130	@ \$160	\$ _____
_____	18 - 22	# _____	@ \$190	@ \$220	\$ _____

CART SEASON PASS: Old Course · Single-\$715 /Couple-\$880; Links · Single-\$360 /Couple-\$470 \$ _____

DRIVING RANGE SEASON PASS Single - \$265 Couple - \$340 Family - \$410 \$ _____

LOCKER RENTAL (includes club storage) # _____ @ \$80 \$ _____

Names _____

HOLE IN ONE INSURANCE # _____ @ \$10 \$ _____

Names _____

WSGA HANDICAP # _____ @ \$35 \$ _____

Names _____

MEMBERSHIP RAFFLE # _____ @ \$20 \$ _____

PLEASE SEND APPLICATION AND CHECK TO: TOTAL FEES DUE \$ _____

New Richmond Golf Club Inc
1226 George Norman Dr
New Richmond, WI 54017

Credit card processing fee of 2.9% \$

\$\$\$ Rec'd: _____

Accepted by: _____ Date: _____

Payment Options

1. **Payment in Full by 12/31/2025** - Receive 4 Guest Passes (Couple Mem) or 2 Guest Passes (Single Mem)
 Guest Passes Valid for 2026 season only for course you are a member of (member must play with guest)
 Monday - Friday All Day, Weekends/Holidays after Noon
2. **Installment Plan: 3 Equal Installments Due: Jan 31st, Feb 28th, & March 31st**
 * Membership privileges may be revoked if payment in full is not received by March 31st
3. **Payment in Full after 04/01/2026** - Based on membership availability

Signature: _____ Date _____