



LAFAYETTE COUNTRY CLUB

Membership Descriptions

Full Membership - Older Spouse or Single Parent is aged 36 or over

Includes the applicant, spouse, and children aged 18 and under, as well as children aged 19-23 who are unmarried, full-time students, and /or living at home. Full Membership grants access to the Nine Iron Restaurant, Golf, Tennis, Swimming, Fitness Center, and Club events. The \$75 monthly food minimum and \$25 monthly CIRF Fund fee applies to the Full Membership.

Associate Membership - Older Spouse or Single Parent is aged 21 – 35

Includes the applicant, spouse, and children aged 18 and under, as well as children aged 19-23 who are unmarried, full-time students, and/or living at home. Associate Membership grants access to the Nine Iron Restaurant, Golf, Tennis, Swimming, Fitness Center, and Club events. The \$75 monthly food minimum and \$25 monthly CIRF Fund fee applies to the Associate Membership (All Age Categories).

Single Membership – Single Individual Only

Single Membership grants access to the Nine Iron Restaurant, Golf, Tennis, Swimming, Fitness Center, and Club events for the single individual. The \$75 monthly food minimum and \$25 monthly CIRF Fund fee applies to the Single Membership.

Social Membership

Social Membership grants access to the Nine Iron Restaurant and Club events only for the individual(s) listed on the membership application. Social memberships do not include access to Golf, Tennis, Swimming, or Fitness Center. The \$75 monthly food minimum does not apply to the Social Membership. The \$25 monthly CIRF Fund fee does apply to the Social Membership.

Membership Type: 2026 Membership Rates

<i>Full Membership (Ages 36 +):</i>	<i>\$5,000</i>	<i>Initiation Fee: \$1,950</i>
<i>Associate Membership (Ages 33 – 35):</i>	<i>\$3,900</i>	<i>Initiation Fee: \$1,750</i>
<i>Associate Membership (Ages 29 – 32):</i>	<i>\$3,200</i>	<i>Initiation Fee: \$1,000</i>
<i>Associate Membership (Ages 25 – 28):</i>	<i>\$2,600</i>	<i>Initiation Fee: \$1,000</i>
<i>Associate Membership (Ages 21 – 24):</i>	<i>\$2,000</i>	<i>Initiation Fee: \$1,000</i>
<i>Single Membership:</i>	<i>\$3,500</i>	<i>Initiation Fee: \$1,500</i>
<i>Social Membership:</i>	<i>\$1,700</i>	<i>Initiation Fee: \$500</i>

Food Minimum: \$75 billed on a monthly basis for Full, Associate, and Single Memberships.

No monthly food minimum on Social Memberships.

Based on Food & Beverage Purchase Only (Tax and Service Charge does not apply)

CIRF Fund (Capital Improvement and Replacement Fund):

\$25 billed on a monthly basis for all memberships

Guest fees for golf and pool apply for Full, Associate, and Single Memberships



LAFAYETTE COUNTRY CLUB

Thank you for your interest in joining Lafayette Country Club!
Please complete this application in full.

Membership Type (Please Select One):

- Full Membership** (Older Spouse or Single Parent is aged 36 or over)
- Associate Membership** – Please Select Age Range Below (Based on Older Spouse or Single Parent):
 - Ages 21 – 24**
 - Ages 25 – 28**
 - Ages 29 – 32**
 - Ages 33 – 35**
- Single Membership** (Single Individual Only)
- Social Membership**

If married, please provide complete information for both the applicant and spouse. If unmarried, please fill out the relevant sections

Applicant Full Name: _____

Spouse Full Name: _____

If the above is a married name, list maiden name here: _____

Residence: _____
Number and Street Address

City

State

Zip Code

Applicant Cell Number: _____ Spouse Cell Number: _____

Applicant E-Mail Address: _____

Spouse E-Mail Address: _____

APPLICANT

SPOUSE

Position/Title

Position/Title

Name of Business

Name of Business

Number and Street Address/P.O. Box

Number and Street Address /P.O. Box

City, State, Zip Code

City, State, Zip Code

Office Phone Number

Office Phone Number

Work E-Mail

Work E-Mail



LAFAYETTE COUNTRY CLUB

APPLICANT

SPOUSE

Place of Birth: _____

Date of Birth: _____

University: _____

Degree & Year: _____

Marital Status: _____

Wedding Anniversary: _____

Children under the age of 18:

Full Name:

Date of Birth: ____ / ____ / ____

Sex: M / F

Date of Birth: ____ / ____ / ____

Sex: M / F

Date of Birth: ____ / ____ / ____

Sex: M / F

Date of Birth: ____ / ____ / ____

Sex: M / F

Children aged 18 or over:

*****List only those who are unmarried, living at home, and/or attending college fulltime*****

Full Name:

Date of Birth: ____ / ____ / ____

Sex: M / F

Date of Birth: ____ / ____ / ____

Sex: M / F

Date of Birth: ____ / ____ / ____

Sex: M / F

I (we) accede to the proposal of my (our) name(s) for membership in the Lafayette Country Club; and make the following statements in connection therewith.

If accepted into membership, I (we) agree to be governed by the Membership Agreement with the LCC Partners, LLC dba Lafayette Country Club as they are now or as hereafter amended.

Signature(s):

Applicant: _____ Date: _____

Spouse: _____ Date: _____