

_____ **Date of Birth**_____

Name and Address of Social, Golf or Business Club in which Applicant holds Membership.

Name:_____ **Address:**_____

Name:_____ **Address:**_____

**References from one Club Member or a Club where you have been a member in the past.
(Letter must be attached to submit Application).**

I agree to abide by the rules and regulations of the Ocean City Golf & Yacht Club.

Applicant's Signature:_____

Date:_____

**John Lynch
Membership Chairman
Ocean City Golf Club**

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