



**Paradise Country Club**  
**Membership Director**  
 Claurisse Orozoco  
 119 Braeside Drive  
 Hamden, CT 06514

Please save and email to:  
 pccmembership@paradisecountryclub

## MEMBERSHIP APPLICATION

### APPLICANT INFORMATION

Name:		E-mail:	
Occupation:	Employer:	Phone:	
Current Address:			
City:	State:	ZIP Code:	

### SPOUSE/PARTNER INFORMATION

Name:	
Occupation:	Cell Phone:
Employer:	E-mail:

### ADDITIONAL FAMILY MEMBERS LIVING AT HOME

NAME:	SEX:	DOB:	RELATIONSHIP:

### REFERENCES

Where you, your spouse, or partner ever a member of Paradise Country Club for at least 3 years?    YES            NO            What Years? \_\_\_\_\_

### REFERENCES: (Paradise Members Preferred)

Name	Address	Phone

### SIGNATURES

I hereby apply for membership to Paradise Country Club. If accepted, I agree to pay the initiation fee and annual dues and periodic assessments as per Club policy. I further agree that I, my family and invited guests, will observe all Club By-Laws, Rules and Regulations and other policies of Paradise Country Club as now established or as hereafter adopted.

Signature of applicant:	Date:
Signature of spouse/Partner:	Date:

