



Diamondhead Property Owners...It pays to live and play in Diamondhead...Diamondhead POA members with Property Owners Association Member ID will receive special pricing on golf memberships.

2020 GOLF MEMBERSHIP OPTIONS:

INDIVIDUAL GOLF

Membership includes unlimited golf on both championship golf courses (Pine & Cardinal) for individual. Additional members of the family may play golf with the payment of a golf fee.

ASSOCIATE INDIVIDUAL GOLF

Primary member must be between the ages of 18 – 35 or primary residence outside 35 miles. Membership includes unlimited golf on both championship golf courses (Pine & Cardinal) for individual with payment of cart fee only. Additional members of the family may play golf with the payment of a golf fee.

FAMILY GOLF

Membership includes unlimited golf on both championship golf courses (Pine & Cardinal.) There will be an additional annual golf membership fee of \$250.00 for each family member over the four member limit.

CUSTOMIZABLE CORPORATE MEMBERHIP

Ask how we can create a custom membership for you and your business.

Additional Fees:

Weekday Golf Fee \$80

Weekend Golf Fee \$90 (Fri, Sat, Sun & Holidays)

Accompanied Guest Rate \$60

*Private Golf Cart Annual Trail Fee \$700

*Additional Private Golf Cart Annual Trail Fee \$440 (per cart)

Shared Annual Cart Plan \$1,050 (non-transferable)

*Monthly Cart Storage \$50

*Annual Cart Storage \$500 (if paid by January 15th)

Cart Fee \$20.00 18-hole / \$14.00 9-hole

USGA Ghin Handicap Service \$35 (included with annual golf fees)

(* indicates available for DPOA Members, Renters, or Golf Members with onsite annual cart storage)

All golf memberships are annual commitments (based on calendar year). First time annual golf members joining after the 23rd of any month will pay a prorated annual golf membership fee beginning on the next full month of membership. Dues and fees are subject to change without notice.

Golf fees in club sponsored golf events specifically for DCC annual golf members only are waived. For outing and event play, annual golf members are encouraged to participate but golf fees for non-club sponsored golf events are not waived for event coordinators and it will be incumbent upon them to charge for their golf outings appropriately.

For DCC Annual Golf Memberships, family is defined as husband, spouse, and any unmarried dependents age 21 and under still living at home. For DCC Annual POA Member Golf Memberships, eligibility is defined as a Diamondhead Property Owners Association dues payer in good standing with current DPOA Member ID #. Residents must present current DPOA Member ID cards for each individual being included on annual golf membership. Non-residents selecting family membership must verify status with DCC Golf Shop since they will not have DPOA Member ID.

Credits will only be granted once per annual golf membership per calendar year for annual golf membership fees with physician verified medical reasons. The credit amount will be the pro rata share of the prepaid annual golf membership fees based on the 1st day of the month following date of written notice received by DCC Golf Shop Staff (ex. Credit request granted on April 17th would receive 8/12 or 67% refund of prepaid annual golf membership fees less the \$80 cancellation fee.) If ACH, the automatic draft will continue as agreed with annual commitment and upon return the credit will be granted. In all cases, credit will be in the form of DCC club credit to be used in DCC Golf Shop. Member Initials: _____

For additional information, please call 228-255-3910, or visit www.diamondheadms.org

Diamondhead Country Club & Golf

7600 Country Club Circle, Diamondhead, Mississippi 39525



**Diamondhead Country Club and Property Owners Association, Inc.
2020 Annual Golf Membership**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

POA # _____ Phone: _____ Email: _____

Please select one of the below annual golf membership options:

INDIVIDUAL

POA Member/Associate Member	Annual	Monthly
Individual (rental cart required)	() \$1,660	() \$143
Individual w/ One *Private Cart	() \$2,360	() \$202
Individual w/ One Shared Annual Cart Plan	() \$2,710	() \$231

POA Non-Member		
Individual (rental cart required)	() \$2,100	() \$180
Individual w/ One *Private Cart	() \$2,800	() \$238
Individual w/ One Shared Annual Cart Plan	() \$3,150	() \$268

FAMILY

POA Member		
Family (rental cart required)	() \$2,640	() \$225
Family w/ One *Private Cart	() \$3,340	() \$283
Family w/ Two *Private Carts	() \$3,780	() \$320
Family w/ One Shared Annual Cart Plan	() \$3,690	() \$312
Family w/ Two Shared Annual Cart Plans	() \$4,740	() \$400

POA Non-Member		
Family (rental cart required)	() \$3,180	() \$270
Family w/ One *Private Cart	() \$3,680	() \$312
Family w/ Two *Private Carts	() \$4,120	() \$348
Family w/ One Shared Annual Cart Plan	() \$4,230	() \$358
Family w/ Two Shared Annual Cart Plans	() \$5,280	() \$445

If family (see definition on reverse and provide documentation), please list additional family member names below:	
2.	
3.	
4.	
5.	(add \$250.00)
6.	(add \$250.00)

() I agree to pay annually as per fee schedule above \$ _____.

() I agree to pay for my annual golf membership commitment in monthly installments, as indicated above, by ACH and have attached the required form. If on ACH from prior year, your deductions will continue automatically and annual rates will adjust per current fee schedule.

Any credit requests must adhere to credit policy (see reverse side.) Credits for those paying through ACH will require a final lump sum payment for balance of year through ACH upon date of notification and then credit will be issued as per the credit policy.Member Initials: _____

Signature: _____ Date: _____

Please return this form to the Diamondhead CC Golf Shop at 7600 Country Club Circle, Diamondhead, MS 39525.

All golf members must commit to a one year membership and either prepay for the year or authorize monthly charges to their bank account by ACH (Automatic Clearing House.) Forms for ACH are available in the DCC Golf Shop.

INTERNAL USE ONLY

Check #: _____ Amount: \$ _____ Chit #: _____ HCP Fee Included: Yes No
BAG TAG #: _____ CART STICKER #: _____