

Palmas Athletic Club (The Club)
Membership Application Form



April 1, 2011

Dear Friends and Neighbors of Palmas Del Mar:

Palmas Athletic Club, Inc. (**The Club**) is pleased to announce the re-opening of the Palmas Del Mar facilities. As part of our re-opening opportunities, at this time we are extending an exclusive invitation to all Palmas Del Mar Property Owners and former Palmas Del Mar Country Club (PDMCC) members to join **The Club**. This Membership Plan will give members and their families access to our unique privileges and amenities including access to our two Golf Courses, the Tennis facilities (the largest in the Caribbean with 14 hard courts, 4 clay courts and 2 Omni courts, gym, the Beach Club (including the Kids Water Park and Lap pool) and to the many social activities offered.

Please note that the Palmas Del Mar Club Facilities will be operated by Palmas Athletic Club, Inc.

A. Membership Eligibility

The Club will offer only a **FULL MEMBERSHIP** (including Golf, Tennis, and Beach Club).
Club membership will be available exclusively for the following groups:

1. **Palmas Del Mar Property Owners, offspring of Palmas Del Mar Property Owners who are over 24 years of age and Parents of Palmas Del Mar Property Owners.**
2. **Former members of Palmas Del Mar Country Club, whether active or on hold and the offspring of Former members of PDMCC who are over 24 years of age.**
3. **Former Corporate members will each individually be able acquire a membership and the offspring of said former Corporate members of PDMCC who are over 24 years of age.**

B. Initial Dues Offering

BENEFITS	Full Membership (Golf, Tennis and Beach Club)
INITIATION FEES	No Initiation Fees for eligible members.
MONTHLY DUES*	\$290.00
MEMBERSHIP TERM	One year commitment is required
PAYMENT	Member must provide a credit card or bank account where dues will be billed monthly at the beginning of the month. The payment of two months in advance and the current month is required at signing of membership agreement; said advanced payment will be applied to the last two months of your membership. All fees are subject to taxes.

C. How to Apply for Membership

Persons who desire to apply for a membership in **The Club** must comply with the following requirements:

1. Complete and sign the *Application for Membership form* available at the Palmas Del Mar Club House, and
2. Pay the amount of the required membership fees at the Palmas Del Mar Clubhouse (as specified in the *Application form*). For a quicker service you may visit our website and make reference to our *Membership Plan Rules & Regulations* and other info regarding our Club and it's benefits at www.palmaspac.com. Your membership will be active upon the receipt of the dues at the Clubhouse.

For further information, please contact 787-656-3000

We'll be honored to have you as part of the Palmas Athletic Club and hope to see you around soon!

Palmas Athletic Club (**The Club**)

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Member Number _____ **Properties Owned in Palmas:** _____

Your interest are: _____ **Referred by:** _____

Golf _____ **Tennis** _____ **Beach Club** _____ **Social** _____ **Other** _____

Last Names _____ **First Name** _____ **Middle Initial** _____

Spouse Name _____

Children's Names _____ **Age** _____ **Birth Date** _____
(Unmarried Children up to the age of 24)

Birth Certificate or Passport is required _____

Grandchildren's Names _____
(Unmarried grandchildren up to the age of 18)

Birth Certificate or Passport is required _____

(If you have children over the age of 24, please complete the required information at the end of Page 4)

Member's Birth Date _____ **Spouse's Birth Date** _____

Wedding Anniversary _____

Mailing Address _____

City _____ **State** _____ **Zip Code** _____ - _____

Home Address _____

City _____ **State** _____ **Zip Code** _____ - _____

Home Phone (____) _____ **Work Phone** (____) _____

Fax Phone (____) _____ **Cell Phone** (____) _____

Emails _____, _____

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****IF YOU LIVE OUTSIDE OF PUERTO RICO PLEASE COMPLETE THE FOLLOWING:***

***Home Address** _____
City _____ **State** _____ **Zip Code** _____ - _____
Home Phone (____) _____ **Work Phone** (____) _____
Fax Phone (____) _____ **Cell Phone** (____) _____

MEMBER'S BUSINESS INFORMATION:

COMPANY/BUSINESS NAME: _____
POSITION/TITLE: _____
Business Address _____
City _____ **State** _____ **Zip Code** _____ - _____
Work Phone (____) _____ **Mobile Phone** (____) _____
Fax Phone (____) _____ **Email** _____

SPOUSE'S BUSINESS INFORMATION:

COMPANY/BUSINESS NAME: _____
POSITION/TITLE: _____
Business Address _____
City _____ **State** _____ **Zip Code** _____ - _____
Work Phone (____) _____ **Mobile Phone** (____) _____
Fax Phone (____) _____ **Email** _____
Emails _____, _____

I hereby certify that I have read the P.A.C. Membership Plan and agree to comply and abide by all clauses therein contained.

APPLICANT'S SIGNATURE

Date

SPOUSE'S SIGNATURE

Date

Assigned Member # _____

PAYMENT OF MEMBERSHIP DUES

I acknowledge that I must provide the Club with one credit or debit card to keep on file with the Club. I authorize the Club to charge my monthly dues at the beginning of each month as set forth in the Club's General Club Rules. I certify that the below listed card or account number is issued to me and all disputes on my account will be directed to Palmas Athletic Club, Corp. I agree that I will submit written notification to Palmas Athletic Club, Corp. giving thirty (30) days notice of a change or termination in my Credit Card/bank account. All rates are subject to taxes.

Credit Card Type / Bank Name _____ Sec. Code _____

Credit Card Number _____ Exp. Date _____

Bank Account no. _____ Checking Account Routing No. _____

Cardholder's Name _____ (please print) Date _____

Cardholder's Signature _____

Additional Cardholder's Name _____ (please print) Date _____

Additional Cardholder's Signature _____

Applicant's Signature _____

Club Representative _____

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Member Name _____ **Member Number** _____
 (PLEASE PRINT)

_____ \$125.00 1 Locker yearly fee (JAN – DEC)

_____ \$125.00 1 Bag Storage yearly fee (JAN – DEC)

_____ \$50.00 1 Bag Storage Jr. Member (17 yrs. & under) yearly fee (JAN – DEC)

_____ \$200.00 1 Combination (Locker & Bag) yearly fee (Jan – Dec)

Payment Method _____ **Credit Card** _____ **Check** _____ **Cash**

Credit Card _____ **Visa** _____ **Master Card** _____ **AMEX**

Credit Card No. _____ **Exp. Date** _____

Name of Cardholder _____
 (PLEASE PRINT)

Signature _____

Charges will be automatically made every year against the above-mentioned credit card, unless cancellation of locker is requested. Cancellation will be effective when locker keys are returned if we do not receive the keys accounting will continue to charge your membership account. The Club shall not be responsible or liable for the loss or theft of anything stored in the Club facilities; member assumes the full risk of storing belongings at the Club.

Note: **Taxes will apply on all charges.**

FOR OFFICE USE ONLY

Locker No. _____ **Bag(s) Storage No.(s)** _____

Issued by _____ **Date** _____

Locker plaque provided _____ **Keys provided** _____

Note:	Names	Property owned
Do you have children over the age of 24?	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____