



THE BOG - GOLF MEMBERSHIP FORM

262.988.1109 | P.O. Box 80079, Saukville, WI 5308 | info@golfthebog.com

Name _____ Title _____ Date _____

Company _____

Billing Address _____ City _____ State WI Zip _____
on Credit Card

Mobile Phone _____ E-mail Address _____

2026 GOLF MEMBERSHIP OPTIONS & FEES

<i>*Payment plans are available</i>	INDIVIDUAL	COUPLE	FAMILY
GOLD Ages 40-64	\$4,600	\$5,400	\$5,850
PALMER Seniors Ages 65+	\$4,100	\$4,950	N/A
EXECUTIVE Ages 19-39	\$3,400	\$3,900	\$4,000
LIMITED 1 Mon-Th Anytime, Fri-Sun After Noon	\$3,800	\$4,650	\$5,150
LIMITED 2 Fri-Sun Anytime	\$3,800	\$4,650	\$5,150
CORPORATE Primary + up to 3 @\$2,800 each	\$4,900	N/A	N/A

OFFICE USE ONLY Date Received _____ Initials _____ Total Amount Due _____ * +Tax 5.5%

- Food & Beverage minimum commitment of \$450 for individuals, \$600 per couple, billed quarterly May-July, Aug-Oct
- Unlimited Golf, Cart & Practice Center, 30-Day Advanced Tee Times
- Amenities Inclusive: Locker & Bag Storage; WSGA & BGA Membership, Private "Members Only" Practice Range
- Preferred Accompanied Guest Fees: Monday - Thursday - \$65 / Friday - Sunday \$80
- Children of Members under the age of 14, can play or practice with Parents after 5PM
- Note: Couple & Family = Golf, Cart & (2x) Inclusive Amenities | Family = Spouse/Partner & Children under 21

Member Signature *Required* _____

I agree to the terms, conditions, and payment of selected Membership Types & Fees. All membership purchases are final. Refunds of membership fees will not be permitted.

PAYMENT

- Cash Check made payable to The BOG Credit Card EZLinks EZSuite EZEngage
- VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Account Number on Card _____

CWV 3-digit code _____ Exp Date _____ Member Charge # _____

To be kept on file with the controller for Membership Charges. All The BOG Policies and Procedures will apply.