



3600 E W Avenue  
Vicksburg, Michigan 49097  
(269) 649-2700  
[www.GolfAngelsCrossing.com](http://www.GolfAngelsCrossing.com)



Dear Fellow Golfer,

Thank you for your interest in becoming a member of Angels Crossing Golf Club and the Creekside Grille, we appreciate your patronage. As we are always seeking to improve your experience at Angels Crossing, we will continue our efforts to provide you with a well conditioned and enjoyable golf facility. We welcome you to enjoy one of Michigan's finest golf courses and dining opportunities as a member.

We understand that our success is greatly enhanced by your satisfaction and support of the facility. Our commitment is to exceed your expectations; in return, we hope that you will make an effort to refer a fellow golfer and show them what a special place Angels Crossing has become. So, please make note of the items below:

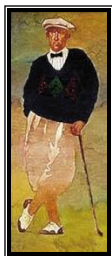
- ✧ **Earn \$150 off your membership.** Refer a new member to an Angels Crossing Golf Club Membership and we will give you \$150 towards your membership without a limit on the number of referrals! Some restrictions include, the prospective member cannot have been a member in the last two years or has already discussed membership with a staff member in the last six months. *(Other restrictions apply.)*
- ✧ **Pay your Membership before December 31, 2018, and receive the early pay discount.**
- ✧ Golf Association of Michigan memberships for handicap will be available through the GAM ([gam.org](http://gam.org)) for \$35 or Angels Crossing for \$30, for easier posting of scores list Angels Crossing as your home course.

Please note the early payment incentive. Applications must be completed and payments in full prior to the due date. If you have any questions, please contact us at 269.649.2700. Thank you and enjoy your golf season!!

Sincerely,

*The Staff, Management, and Village of Vicksburg*





# ANGELS CROSSING GOLF CLUB

3600 E W Avenue ★ Vicksburg, MI 49097

(269) 649-2700

[www.GolfAngelsCrossing.com](http://www.GolfAngelsCrossing.com)



**Dani Andriacchi**

2018 Ladies Club Champion

**Bill Anderson**

2018 Men's Club Champion

**Rudy Callen**

2018 Men's Low Net Champion

**Keith Maisto**

2018 Senior Champion

**Bob Seely**

2018 Low Net Senior Champion

## 2019 MEMBERSHIP APPLICATION

### Membership

- Includes unlimited play with cart any day, no surcharges, and no restrictions for booking tee times seven days in advance.
- Member only parking area.
- Unlimited range.
- 10% off Creekside Grille (food only)
- Member guest rates.

\* Children must be 17 or under and living at home to qualify under membership plan.

\*\* Children 17 and under are prohibited from operating golf carts.

± Junior memberships are available for children 17 and under, include Monday – Friday (no holidays) and do not include cart.

Under/Over memberships: Under birthday must be after 4/1/2019 and Over birthday must be before 4/1/2019.

2019 Membership Fees	Received before	Received after
<b>Village Resident</b>	Dec 31	Dec 31
Single Adult	\$1,525	\$1,995
Couples	\$1,800	\$2,295
Family*	\$2,000	\$2,595
Under/Over 30/60	\$1,300	\$1,775
Junior	\$250	\$300
<b>Non-Resident</b>		
Single Adult	\$1,600	\$1,995
Couples	\$1,900	\$2,295
Family*	\$2,100	\$2,595
Under/Over 30/60	\$1,375	\$1,775
Junior	\$250	\$300

### Please print or type:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Seasonal Address: \_\_\_\_\_ Phone: \_\_\_\_\_

From Date: \_\_\_\_\_ To Date: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Spouse E-mail: \_\_\_\_\_

### Worksheet

Membership Type: \_\_\_\_\_ @ \$ \_\_\_\_\_

Names requesting handicap service:

Name: \_\_\_\_\_

USGA Handicap Service: \_\_\_\_\_ @ \$ 30 \_\_\_\_\_

Name: \_\_\_\_\_

TOTAL = \$ \_\_\_\_\_

Enclosed is my check for \$ \_\_\_\_\_

▲ Note: 3% additional surcharge for credit card payment.

Make checks payable to Angels Crossing Golf Club

I HEREBY APPLY FOR THE ABOVE MEMBERSHIP AND CERTIFY THAT THE ENCLOSED INFORMATION IS COMPLETE AND ACCURATE. I HAVE READ AND AGREE TO ABIDE BY THE RULES/REGULATIONS OF THE CLUB AND ANY ADDITIONAL POLICIES, RULES AND/OR REGULATIONS SET FORTH BY ITS MANAGEMENT.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If requesting a Family Membership, please list all children eligible for membership (Use back if needed).

\*\*Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

\*\*Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

\*\* Children must be 17 or under and living at home to qualify under membership plan.