

OAK RUN GOLF COURSE MEMBER INFORMATION SHEET

NAME: _____ DOB: _____
(LAST) (FIRST) (MIDDLE)

SPOUSE: _____ DOB: _____
(LAST) (FIRST) (MIDDLE)

ADDRESS: _____
(STREET) (BOX #)

(CITY) (STATE) (ZIP)

PHONE: HOME () _____

DAY () _____

E-MAIL ADDRESS: _____
(OPTIONAL)

FOR CREDIT CARD PURCHASE ONLY

MASTERCARD: _____ VISA: _____ (ONLY CHECK ONE)

CARD NUMBER: _____

EXPIRATION DATE: _____

CODE ON BACK OF CARD: _____

NAME AS IT APPEARS ON CARD: _____

Your Signature

PLEASE REMIT TO:

OAK RUN GOLF COURSE
1470 KNOX RD 1725N
DAHINDA, IL 61428