



600 Golf Drive NE • Warren, OH 44483
Phone: 330.372.4024 • Fax: 330.372.9733
Email: Info@TrumbullCC.com
Website: TrumbullCountryClub.com

NEW MEMBER APPLICATION

MEMBER INFORMATION (Please print)

Last Name First Middle
Address City State Zip
Daytime Phone Home Phone Cell Phone
Employer Business Address
City State Zip Send Statement to: Home Business
Age Date of Birth Email Married Single
Name (Spouse/Significant Other) Date of Birth
Email Cell

PLEASE LIST ALL CHILDREN UNDER 26 YEARS OF AGE

Child's Name Date of Birth Male Female
Child's Name Date of Birth Male Female
Child's Name Date of Birth Male Female
Child's Name Date of Birth Male Female

How did you learn about Trumbull Country Club?

TCC Member TCC Membership Director Event held at TCC
Newspaper Ad U.S. Mail Email Website Other

ENROLLMENT INFORMATION

Desired Membership Category Golf Social

Voting Equity Member: For an additional \$50 per month, Golf and Social members can receive voting rights and equity in Trumbull Country Club. Your voting/equity contribution enables the Club to support its capital funds programs and in exchange, you will be given a proportionate equity interest with voting rights and Board representation. Would you like to become a Voting Equity Member? Yes No

Please note that all equity rights and interests are forfeited upon resignation from or termination of your membership in the Trumbull Country Club.



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**AGREEMENT**

I agree to pay the annual dues and optional fees as specified for the membership category selected.

**Trumbull Country Club By-laws:** I agree to comply with the By-laws and Rules & Regulations of Trumbull Country Club. These have been adapted and approved by the Board of Directors for the best interest of the Club and its Members in their enjoyment of it. They are subject to change from time to time and will be posted appropriately.

**Membership In Good Standing:** Members have the responsibility to act in an appropriate manner and pay annual dues, optional fees and usage charges incurred while using the Club. The Club has the right to expel or suspend any member from the Club by the affirmative vote of the majority of Board of Directors. I understand I remain obligated for and agree to pay my annual dues, optional fees and usage charges for the duration of my membership. There will be no refund of any monies paid.

**Admission Policy:** It is the policy of Trumbull Country Club not to discriminate in our recruitment, admission or treatment of members. The Club will continue to base its decisions regarding new members so as to further the principles of equal opportunity. The Club's Board of Directors reserves the right to make the final decision pertaining to the acceptance of new members.

**Policy regarding Membership Resignation and/or Change of Membership Status:** Memberships, regardless of category or effective date, continue through the last day of May each year. All memberships automatically renew annually on June 1, unless a written resignation, a written request for a leave of absence or a written request for a downgrade in membership category is received and acknowledged by the TCC Board of Directors prior to June 1. Any resignations, leaves of absence or requests for a downgrade in membership category received after the last day of May will not be accepted. Once received by TCC, resignations or leaves of absence do not relieve a member of their obligation to pay monthly dues and all other charges incurred through the last day of May. Reduced rates, as a result of a downgrade in membership category, will not be in effect prior to June 1, regardless of when the request was submitted. Members may increase their membership plan type at any time with Board approval.

I have read and accept the terms of this Agreement and the Terms and Conditions of Membership.

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

**FOR TCC OFFICE USE ONLY**

Approved by TCC Membership Director (Signature) \_\_\_\_\_ Date \_\_\_\_\_

Approved by TCC General Manager (Signature) \_\_\_\_\_ Date \_\_\_\_\_

Board of Directors Decision:       Approved                       Denied                      Date \_\_\_\_\_



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**RELEASE OF LIABILITY OF THE TRUMBULL COUNTRY CLUB**

I acknowledge that I have voluntarily chosen to participate in a program of physical exercise through the use of the Vibe Studio facility. I acknowledge that the strenuous nature of the program and the risks associated with my participation in the program have been explained to me, including but not limited to, risks of physical injury, abnormal blood pressure, heart attack and death. I further acknowledge that the classes, functions, programs and other activities are provided at the Vibe Studio at The Trumbull Country Club.

I expressly assume all risk for my health and well being and expressly assume all risks associated with participating in any programs or exercise activities offered at the Vibe Studio and/or The Trumbull Country Club including, but not limited to, the negligence of Vibe Studio and/or The Trumbull Country Club and any other organization participating or involved in providing or promoting any classes, functions, programs, testing or other activities. I also hereby release, waive, discharge and covenant not to sue any class instructors or any sponsoring organizations, Vibe Studio and/or The Trumbull Country Club, Inc. and any other organization providing or promoting classes, functions, programs, testing or other activities (including, with limitation, the owners, members, officers, directors, employees and representatives of any of the foregoing) at any time hereafter, from any and all demands, negligence of any of the foregoing people or entities. Anyone under the age of 18 must be accompanied by an adult member, and the adult member executing this Release assumes all risk of harm to the minor.

In the event that my physician has recommended any limitations to my physical activity, or I have experienced any condition(s) that would limit my safe participation, I hereby attest that I have informed my physician of the condition(s) and have obtained express consent from my physician to participate in the programs.

I have read and understand the terms of this Release of Liability, the waiver of any claims and my express assumption of risk.

**PHOTO RELEASE FORM**

I hereby grant and authorize Vibe Studio and/or The Trumbull Country Club the right to take, edit, alter, copy, exhibit, publish, distribute and make use of any and all photos or video taken of me to be used in any promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalists, websites, social networking sites and other print and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats and markets now known or hereafter devised. This authorization shall continue indefinitely unless I otherwise revoke said authorization in writing. I understand and agree that these materials shall become the property of the Vibe Studio and/or The Trumbull Country Club and will not be returned.

I hereby hold harmless and release Vibe Studio and The Trumbull Country Club from any and all liability, claims and causes of action which I, my heirs or representative may have relating to the publication, use or dissemination of any photograph.

Address \_\_\_\_\_

Signature \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Printed Name \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

Birthday \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_