

Wyckoff Country Club 2026 Membership Categories & Annual Rates

Golf Membership Includes:

Unlimited Golf, Preferred teetime reservations, Access to Member Tournament & Leagues,,
Food Discounts, Pro Shop Merchandise Discounts.

Senior (Ages 65+)

- Individual: \$1250
- Spouse: \$600
- Junior: \$250

Executive (Ages 35–64)

- Individual: \$1450
- Spouse: \$600
- Junior: \$250

Young Executive (Ages 24–34)

- Individual: \$1250
- Spouse: \$500
- Junior: \$250

Military / First Responder (all ages)

- Individual: \$1000
- Spouse: \$500
- Junior: \$250

College (Ages 19-23)

Individual: \$600

Junior (11-18)

Individual: \$400

Corporate Membership

- Corporate 4: 4 qualified persons + 1 flex: \$4000
- Corporate 2: 2 qualified persons + 1 flex: \$2400

Social Memberships

Unlimited Access to Wyckoff Social Events, Food Discount, Proshop Discounts, 50% off rounds of golf

- Individual Rate: \$700
- Spouse: \$400

MEMBERSHIP TYPE - *Check all that apply*

Automatically renewed and billed annually unless written notification is received

- ☐ Single Member (Age 35-64)
- ☐ Young Executive Single (24-34)
- ☐ Senior Single (65+)
- ☐ Military/First Responder *(must provide proof of enrollment)*
- ☐ Corporate 4 *(must provide company letterhead, Fed Tax ID#, proof of employment)*
- ☐ Corporate 2 *(must provide company letterhead, Fed Tax ID#, proof of employment)*
- ☐ College (18-23) *must provide proof of age & school enrollment*
- ☐ Junior (13-17) *must provide proof of age*
- ☐ Social Member *(discounted greens fees, access to club social events)*
- ☐ Spouse add-on (\$600)
- ☐ Junior add-on (\$250)

PRIMARY MEMBER NAME:

First _____ MI _____ Last _____
Address _____
City _____ State _____ Zip _____
Date Of Birth _____
Primary Email _____
Emergency Contact: _____ Phone _____

SECONDARY MEMBER NAME (Spouse, Junior, or Corporate)

First _____ MI _____ Last _____
Address _____
City _____ State _____ Zip _____
Date Of Birth _____
Primary Email _____
Emergency Contact: _____ Phone _____

ADDITIONAL MEMBER NAME (Spouse, Junior or Corporate)

First _____ MI _____ Last _____
Address _____
City _____ State _____ Zip _____
Date Of Birth _____
Primary Email _____
Emergency Contact: _____ Phone _____

ADDITIONAL MEMBER NAME (Spouse, Junior or Corporate)

First _____ MI _____ Last _____
Address _____
City _____ State _____ Zip _____
Date Of Birth _____
Primary Email _____
Emergency Contact: _____ Phone _____

NAME OF BUSINESS (if applicable):

2026 OPTIONAL FEES - *Check all that apply*

___ Annual Cart Plan \$1250 for primary member, additional \$750 per member for spouse, or corporate under same membership
(must be paid in full before 2026 season, or when prior to using)

___ USGA Annual Handicap Fee - \$50

___ Bag Storage - \$150 *Automatically billed from year to year unless cancelled by member.*

___ Locker - \$150 *Automatically billed from year to year unless cancelled by member.*

___ Bag Storage & Locker - \$250

Member Daily Cart Rates - \$18 per person for 18 holes / \$10 per person for 9 holes

2026 Non-member/Guest fees

TBD

Members Only Holiday Cart Package:

Buy 10 carts, get 12 or buy 20 carts get 25, valid for the 2026 season

Can be gifted to another WCC member but carts or for named member only

WCC Member Charging Policy

In order to activate charging privileges within your member account, whether for Monthly Dues billing or any other charge, it is a requirement to provide us with a valid credit card to keep on file. *The preferred method of payment is cash or check; if paying with credit card, a 3.0% surcharge fee will be incurred.*

Please CHOOSE from payment options as noted below:

1. ____ I will PAY DUES IN FULL and I WILL NOT charge to my member account for anything. I will pay cash or credit card at time of sale for carts, guest fees, food/beverage, etc.

If applying for member charging privileges, see options 2 or 3 below.

2. ____ Please sign me up for the Automatic Payment Plan to have my credit card accessed every month automatically on the 24th for member dues and any other purchase in that same month. (You will still receive your member statement showing all transactions). Please sign below.

3. ____ I opt to pay from my member statement for member dues and any other purchase with cash, check or call with credit card; MUST BE PAID BY 15th (unless other date specified on statement) of the new month. If balance is not paid on time, the authorized credit card on file will be accessed for payment.

For Options 2 and 3 above, I authorize Wyckoff Country Club to access my credit card for charges incurred:

Check One : Visa ____ Master Card ____ Discover ____ AMEX ____

Card# _____ Exp Date: _____

CVV Code _____

Member Signature: _____ Date: _____

This application is submitted as an agreement to pay the full annual membership fee for the availability and use of the desired country club services and facilities for the length of the membership. Membership is automatically renewed every December for the new year following; written resignation is required to discontinue billing and automatic payments. This contract is both binding and legal. Please note that any dues or deposits are non-refundable. Only permanent disability or death can terminate this membership during the year. Temporary circumstances are not grounds for cancellation. Use of this membership is subject to WCC Rules and Regulations as they exist, and as they may be amended by ownership. By signing below, I agree to abide by all rules, regulations, and policies of Wyckoff Country Club.

Member Signature: _____ Date: _____