



2020 LATE SEASON PASS

August 1, 2020 through the End of the 2020 Season

Please complete mailing/telephone/email information – PLEASE PRINT CLEARLY.

Please check if you are new to Hillcrest Golf Club _____

Name: _____ Member # _____

Address: _____

Telephone: _____ Email: _____

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Late Season Pass \$375_____ (Unlimited golf from 8/01/20 thru end of season)

TOTAL PAID \$_____

Paid by _____ cash _____ check _____ MC/VISA _____ AMX _____ Disc

Employee verification initials _____

I understand this pass is non-refundable 24 hours after application is processed at Hillcrest Golf Club.

Signature

Date