



2025 Luverne Country Club Membership Application

Name _____ Spouse _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Email Address _____

Spouse # _____ Email Address _____

Children's Name & Ages *(Includes high school and college students 22 and younger .)*

Referred by _____

(New single or family memberships receive \$50 gift card/Referrer \$50 gift card)

Memberships

****Memberships must be paid or postmarked prior to March 1, 2025, to receive early bird discount****

FAMILY MEMBERSHIPS

Family Membership Rate (Early Bird) \$1,350

Family Membership March 1 and after \$1,550

4-month payment plan (\$387.50/month) \$1,550

6-month payment plan (\$258.30/month) \$1,550

SINGLE MEMBERSHIP

Single Membership Rate (Early Bird) \$950

Single Membership March 1 and after \$1,100

4 Month payment plan (\$275/month) \$1,100

6 Month payment plan (\$183.33/month) \$1,100

STUDENT MEMBERSHIP

Ages 0-10, no charge while golfing with guardian

Ages 10-15 (does not include cart) \$75

Ages 16-18, includes cart \$275

Ages 18-22, includes cart *(Full time student/age 22 or younger)* \$400

DRIVING RANGE

Family \$100

Single \$75

PERSONAL ITEMS

Winter Cart Storage Nov 15-Mar 15 \$50

Personal Electric cart fee \$75

Clothing Locker \$30

SUBTOTAL OF THIS PAGE \$ _____

MGA HANDICAP

(Required for Men's League and Women's Formal League or if you plan to sub in League)

Names _____

\$40/per person \$ _____

MEN'S LEAGUE DUES

9 Holes \$50

18 Holes \$75

WOMEN'S LEAGUE DUES

\$30

Please indicate which league you plan to play in:

Social League

Formal League

STOCK

All members are required to own one share
\$30/6 years or 1 time \$180 fee

\$ _____

PAYMENT

If paying membership with credit card there is a one-time transaction fee of \$75
This includes payment plan options as well

SUBTOTAL OF THIS PAGE \$ _____

SUBTOTAL OF PAGE 1 \$ _____

TOTAL OF BOTH PAGES \$ _____

METHOD OF PAYMENT

Installments Check Visa Mastercard

Credit Card Number _____ Expiration Date _____ CVV Code _____

Zip Code _____

Signature if paying with credit card _____

Mail this application and check or credit card information to:

Luverne Country Club
Box 853
Luverne, MN 56156

Nontraditional families accepted – pending board approval