

*Wooded View Golf Course
2404 Greentree Boulevard North
Clarksville, TN 47129
812-283-9274*

Application for 2012 Season Pass

Please Print the following information:

Name _____ Date of Birth _____

Address _____ e-mail _____

City _____ State _____ Zip _____

Phone _____ Emergency Contact/Phone _____

Choice of 2012 Season Pass

Resident Rate

Weekday \$385

7 Day \$550

Non-Resident Rate

Weekday \$485

7 Day \$690

Senior Resident (60 +)

Weekday \$345

7 Day \$500

Senior Non-Resident (60+)

Weekday \$435

7 Day \$625

Junior (17 or younger)

\$135

(See reverse side for conditions)

Wooded View Golf Course

Season Pass Conditions

1. Season pass for green fees when course is available.
2. No preferred tee times. See Tee Time Procedures attached.
3. Does not include tournaments, outings or special events, except monthly ladies and men's association's events.
4. Requires check-in at the pro shop and possession of a receipt prior to play each day.
5. Not transferable.
6. No refunds.
7. Does not include golf cart rental or driving range balls.
8. Starter is responsible to pair singles and two-somes.
9. Season pass is valid from March 1, 2012 to February 28, 2013.
10. Tournaments and outings are to be expected to occur at Wooded View throughout the season.
11. Resident fees are available to those persons having permanent residency in the Clarksville Park District. Proof of residency is required. Please have valid driver's license, lease agreement or other verifiable proof of residency available when application is submitted.
12. The Clarksville Parks and Recreation Board has determined that in the best interest of all golfers, a total of 300 season passes will be sold during the 2012 season. Persons who purchased a 2011 season pass will have the first opportunity to purchase a 2012 season pass until February 28, 2012. After that date, passes will be sold on a first come first serve basis. If a waiting list is necessary, Clarksville residents will be given preference.

I accept the conditions listed above and I agree to adhere to the policies and procedures established at Wooded View Golf Course.

Signature of Applicant _____ *Date* _____

Amount Paid _____ *Check* _____ *Cash* _____

Office Use Only:

Received By: _____ *Date Received:* _____ *Time Received:* _____

Residency Verified By: _____