

2026 Membership Application

BEAU RIVAGE GOLF & RESORT

WILMINGTON, NORTH CAROLINA 28412



PRIMARY PROFILE

First Name * M.I. Last Name * Date of Birth (MM/DD/YYYY) *

Mailing Address * City, State Zip Code *

Home Phone # * Mobile Phone # * E-mail Address *

Occupation Place of Work Work Phone #

Work Address City, State Zip Code

PARTNER PROFILE

First Name * M.I. Last Name * Date of Birth (MM/DD/YYYY) *

Mailing Address * City, State Zip Code *

Home Phone # * Mobile Phone # * E-mail Address *

Occupation Place of Work Work Phone #

Work Address City, State Zip Code

DEPENDENT PROFILES

(CHILDREN UNDER FAMILY MEMBERSHIP OR AUTHORIZED CARDHOLDERS UNDER BUSINESS MEMBERSHIPS)

First Name * M.I. Last Name * Date of Birth (MM/DD/YYYY) *

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☐ ANNUAL RENEWAL

☐ NEW MEMBERSHIP

REFERRAL ID : _____

{ } Club Junior (\$1,800.00 or \$150.00/mo)

{ } Add Junior Trail Plan Option (+\$2,000.00)

{ } Club Student (\$2,100.00 or \$175.00/mo)

{ } Add Student Trail Plan Option (+\$2,500.00)

{ } Club Executive (\$2,400.00 or \$200.00/mo)

{ } Add Executive Trail Plan Option (+\$3,000.00)

{ } Club Senior (\$2,700.00 or \$225.00/mo)

{ } Add Senior Trail Plan Option (+\$2,500.00)

{ } Club Single (\$3,000.00 or \$250.00/mo)

{ } Add Single Trail Plan Option (+\$3,000.00)

{ } Club Couple (\$4,500.00 or \$375.00/mo)

{ } Add Couple Trail Plan Option (+\$4,500.00)

{ } Club Family (\$6,000.00 or \$500.00/mo)

{ } Add Family Trail Plan Option (+\$6,000.00)

{ } Club Seasonal (SGL) (\$1,000.00)

{ } Club Seasonal (CPL) (\$1,500.00)

{ } Club Seasonal (FAM) (\$2,000.00)

{ } Club Business-50 (\$4,450.00)

{ } Club Business-100 (\$8,400.00)

{ } Club Business-150 (\$11,850.00)

{ } Club Business-200 (\$14,800.00)

{ } Resort Single (\$600.00 or \$50.00/mo)

{ } Resort Couple (\$900.00 or \$75.00/mo)

{ } Resort Family / Business (\$1,200.00 or \$100.00/mo)

{ } Resort Seasonal (SGL) (\$250.00)

{ } Resort Seasonal (CPL) (\$375.00)

{ } Resort Seasonal (FAM) (\$500.00)

OFFICE NOTES

How would you like to receive any account billing notifications?

{ } Paper

{ } Email

Would you like to receive itemized statements for monthly charges?

{ } Yes

{ } No

Credit Card Information

{ } CARD ALREADY ON-FILE

{ } Visa

{ } MasterCard

{ } AMEX

{ } Discover

Cardholder's Name : _____

Expiration (MM/YY) : _____

Credit Card Number : _____

3-Digit CVV Code : _____

Card Billing Address : _____

Zip Code : _____

I certify that the information provided on this application is true and accurate to my knowledge and hereby apply for membership in accordance with all terms and conditions set-forth in Beau Rivage Golf Club & Resort Membership Terms & Conditions. As the primary member and account holder, I understand that my membership is automatically renewed annually, agree to fulfill all financial obligations pertaining to my membership and make this application with intent to be bound.

Applicant Signature : _____

Date (MM/DD/YYYY) : _____

FOR OFFICE USE ONLY

☐ ADDED TO USGA GHIN

☐ ADDED TO COURTRERESERVE

☐ ADDED TO MEMBER ROSTER

Received by: _____

Date: _____

BR Rep. Signature : _____

Notes:

