



2024 NEW Memberships

January 1, 2024 – December 31, 2024

<u>MEMBERSHIPS</u>	<u>MONTHLY DUES</u>	<u>CARTS or CART PLAN</u> <u>(Required Per Round)</u>
Glynn & Camden County Resident SINGLE EAGLE	\$335 + \$30 monthly Food & Beverage Minimum	\$25 (18) / \$13 (9) Per Person / Per Round or \$175 per month or \$1925 Annual
Glynn & Camden County Resident FAMILY EAGLE	\$445 + \$50 monthly Food & Beverage Minimum	\$25 (18) / \$13 (9) Per Person / Per Round or \$275 per month or \$3025 Annual
Glynn & Camden County Resident PAR (Mon-Fri)	\$305 + \$15 monthly Food & Beverage Minimum (per person)	\$50 per round on Saturday & Sunday \$25 (18) / \$13 (9) Per Person / Per Round or \$175 per month or \$1925 Annual
BIRDIE	\$600 ANNUAL (per person)	\$60.00 per person per round @ SGC \$52.50 per person per round @ HOGC
Non-Resident SINGLE	\$500 monthly (NO Food & Beverage Minimum)	\$175 per month
Non-Resident FAMILY	\$600 monthly (NO Food & Beverage Minimum)	\$275 per month

Current 2023 Members, please contact Harry Kicklighter at SGC or Bubba Clark at HOGC for updated information.

- E-Mail and Billing Address **REQUIRED**
- All rates subject to 7% Camden County Sales Tax
- *All Monthly Paid Membership rates are subject to change with 30 day written notice.*
- *Annual (12 months) Paid Membership rates are locked in until December 31, 2024.*
 - Call Sanctuary Golf Club at [912.466.0080](tel:912.466.0080) or
 - Heritage Oaks Golf Club at [912.280.9525](tel:912.280.9525) for more details



2024 Membership Application

Name: _____

Spouse (if family membership): _____

Address (Required): _____

City: _____ State: _____ ZIP _____

Email: _____ Phone: _____

Schedule your payment to be automatically charged to your Visa, MasterCard, American Express or Discover Card, please set-up with Golf Shop staff.

- Request for refund of membership fees must be submitted to Heritage Oaks GC or Sanctuary GC in writing and dated 30 days in advance. Refunds will only be considered due to - medical conditions, supported by a doctor’s certificate, or a transfer of residence.
- When requesting a refund, any Gift Card issued with membership must be returned or PAID for
- When requesting a refund, any outstanding invoices must be paid in FULL.

PLEASE CIRCLE and INITIAL SELECTED MEMBERSHIP ON RATE SHEET

Signature: _____ Date: _____

HOGC/SGC Representative: _____ Date: _____

Sanctuary Golf Club
2050 Sanctuary Wynd
Waverly, Georgia 31565
912.466.0080

Heritage Oaks Golf Club
126 Clipper Bay Road
Brunswick, Georgia 31523
912.280.9525