

# 2026 NEW MEMBER APPLICATION



(Please Print)

- |  |  |
|--|--|
| <input type="checkbox"/> TRIAL                   | <input type="checkbox"/> CLERGY                    |
| <input type="checkbox"/> CORPORATE               | <input type="checkbox"/> JUNIOR Ages 12-19         |
| <input type="checkbox"/> INTERMEDIATE Ages 25-34 | <input type="checkbox"/> STUDENT Anyone ages 20-24 |
|  | <input type="checkbox"/> SOCIAL GOLF               |

Referred by: (if applicable) \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant DOB: \_\_\_\_\_

Co-Applicant: (Spouse or Significant Other) \_\_\_\_\_

Co-Applicant DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State, Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Business or Cell phone: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

Email Address: \_\_\_\_\_

Send Statement To: (circle one) HOME BUSINESS

If business include address:

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian (if applicant is under 18 years old)

\_\_\_\_\_  
Date

Please email to: [mcc@mesabacc.com](mailto:mcc@mesabacc.com) or mail to: Mesaba Country Club - P.O. Box 157 - Hibbing, Mn 55746