



**ROCK RIVER GAP, INC.**

3901 Dixon Ave.  
 Rock Falls, IL 61071  
 Office 815-625-2387  
 Pro Shop 815-625-2322

# RRGap, Inc. 2023 Application Form For Golf Passes

Name of Applicant : \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Spouse Name : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Type of pass: (Check All boxes that apply)

**Golf Passes**

Include:  
 Unlimited Golf, and  
 passholder account  
 charging privileges

- |                          |                              |                          |                              |
|--------------------------|------------------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | Single with Cart \$1450.00   | <input type="checkbox"/> | Single Range Pass \$250.00   |
| <input type="checkbox"/> | Couples w/Cart \$1650.00     | <input type="checkbox"/> | Couples Range Pass \$300.00  |
| <input type="checkbox"/> | Family/GP w/ Cart \$1750.00  | <input type="checkbox"/> | Family Range Pass \$350.00   |
| <input type="checkbox"/> | Senior Walking Only \$950.00 | <input type="checkbox"/> | Jr under 18 no cart \$500.00 |

Military 10% Discount

- |                          |                         |
|--------------------------|-------------------------|
| <input type="checkbox"/> | Handicap Fee \$60 each  |
| <input type="checkbox"/> | Club Storage \$175      |
| <input type="checkbox"/> | Locker Rental \$100     |
| <input type="checkbox"/> | Pull Cart Storage \$175 |

Name of person(s) Handicap Fee is for :

\_\_\_\_\_  
 \_\_\_\_\_

## All information must be complete for account to be accepted

Name of all Family Members on Family Passes

Name	Age:
_____	_____
_____	_____
_____	_____
_____	_____

Can they charge on  
 this account

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

## Course Code Of Conducts:

Please read the following rules of the course and sign below to agree to adhere to the below rules while playing. Infractions will result in immediate removal from our property and loss of all fees for the day. This applies to members as well as daily players. Thank you for your understanding.

- 1) All players must check in at the proshop
- 2) No Food or Beverages may be brought onto the property.
- 3) No using the course as a driving range
- 4) Two players 1 cart. If you want a single cart you will be charged for both seats
- 5) Obey all cart traffic signs as they may change with weather
- 6) Keep carts on cart path around all greens & tees. There are green stakes marking boundaries around the green
- 7) No carts in any of the long grasses/No mow areas
- 8) Use tunnel when crossing to and from the back nine
- 9) Repair and replace divots

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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Credit Card Information is required for all accounts PLEASE PRINT INFO BELOW

Type of Card: \_\_\_\_\_ Account # \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Name on card \_\_\_\_\_

Would you like us to auto bill this card each month for your account charges?  YES  NO

\*It is understood that bills Not Paid by the 25th of the month will be charged to the above credit card  
A 3% Transaction fee will be added for all Pass Fees paid by Credit Card  
However this fee is not added on Auto Billing your credit card each month

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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## RRGAP, INC Office Info:

Total Purchased: \_\_\_\_\_ Other Account Notes: \_\_\_\_\_

Items added after pass was purchased: \_\_\_\_\_

# of Handicap Fees purchased: \_\_\_\_\_

Paid by Check: total amount collected \_\_\_\_\_ Check # \_\_\_\_\_

Paid by Credit Card: total amount collected \_\_\_\_\_ 3% Fee \$ \_\_\_\_\_

Paid By Cash: total amount collected \_\_\_\_\_

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