

2026 Spooner Golf Club Rates

Memberships	Early Bird (by 12/31/2025)	Regular (after 1/1/2026)
Single	\$1000	\$1,100
Single Saver*	\$800	\$900
Couples (Family \$100 more for Child under 18)	\$1,500	\$1,700
Couples Saver (Family \$100 more for Child under 18)	\$1,200	\$1,400
Twilight Single/Couple (after 3:00 pm)	\$650/\$850	\$650/\$850
Young Adult 18-34	\$450	\$450
Youth Under 18	\$200	\$200
Trail Fee <i>Stored at the residence</i>	\$425	
Cart Storage - Gas Cart <i>Stored at SGC</i>	\$350	
Cart Storage - Electric Cart <i>Stored at SGC</i>	\$425	
Season Cart (Single) <i>Allows one person to ride on an SGC cart for the season.</i>	\$650	\$350 Twilight
Season Cart (Double) <i>Allows a couple to ride on an SGC cart for the season.</i>	\$1,000	\$550 Twilight

*Saver memberships are valid Mondays-Thursdays without restrictions and Fridays, Saturdays and Sundays after 2:00

Member Pricing	Driving Range	Non-Member Pricing
\$200	Single	\$300
\$250	Couple	\$350
\$300	Family	\$400
\$30	Handicap Fees	\$30

SPOONER GOLF CLUB --- 2026 Membership Form

Membership Name(s): _____		
Member Address: _____		
City: _____	State: _____	Zip: _____
Email Address: _____		Phone: (____) _____
Family Members <i>(if applicable, provide names and ages of family members)</i>		

Enter Quantity	Membership/Passes/Fees	Price	Enter Total
	Single Membership : Regular / Saver <i>Early Bird</i>	\$1100/\$900 \$1000/\$800	
	Couples Membership : Regular / Saver <i>Early Bird</i>	\$1700/\$1400 \$1500/\$1200	
	Additional Dependant Under 18	\$100	
	Twilight Membership/Cart	\$650/\$800	
	Junior 17 & Under Pass	\$200	
	Young Adult 18-34 Pass	\$450	
	Golf Cart Season Fee : Single / Couple Twilight	\$650/\$1000 \$350/\$500	
	Trail Fee	\$400	
	Cart Storage : Gas / Electric	\$350/\$425	
	(30) Nine Hole Green Fee SMART Card	\$550	
	(30) Nine Hole Cart Fee SMART Card	\$250	
	Range Fee : Single / Couple / Family	\$200/\$250/\$300	
	Handicap Fee	\$30	
TOTAL Membership, Passes & Fees+ Tax (x1.055)			\$

Please charge my (circle one): VISA MASTERCARD DISCOVER in the amount of \$ _____

There will be a 3% fee for credit card use after 12/31/2025. (Use Debit Card to avoid this fee)

Credit Card Number: _____ Exp (MM/YY): _____

CVV: _____ Zip Code: _____ Signature Required: _____

Refund/Credit Policy: Initial here once read

A refund of membership fees will be considered only for reasons involving personal health or a change in circumstances for the persons listed on this form. A letter describing the request must be submitted to the SGC Board of Directors on or before the following dates for consideration.

Refund Request Postmarked before or on May 1	100% Refund
Refund Request Postmarked May 2 - June 1	75% Refund
Refund Request Postmarked June 2 - July 1	50% Refund
Refund Request Postmarked July 2 - August 1	25% Refund
Refund Request Postmarked after August 1	0% Refund

Mail Completed Form to: Spooner Golf Club, P.O. Box 146, Spooner, WI 54801