

# TOWN OF BETHLEHEM

Albany County - New York

## PARKS & RECREATION DEPARTMENT

ELM AVENUE PARK

261 ELM AVENUE

DELMAR, NEW YORK 12054

(518) 439-4955 opt 3

Fax: (518) 439-2144

Email: nlanahan@townofbethlehem.org

**John H. Cunningham**  
Town Supervisor

**Nan Lanahan**  
Administrator



## Colonial Acres Golf Course 2009 Season Pass Greens Fees

Membership Category	Total Fee
Individual Adult	\$400
Individual Student (6-18)	\$300
Family of 2	\$675
Family of 3	\$900
Family of 4+	\$1,100

Date \_\_\_\_\_

Membership Category: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

### Application: (Please Print)

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Work Phone \_\_\_\_\_

Primary Email address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Family Memberships (must be a member of the household at the above address)

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

***Applicant must agree to abide by all rules and regulations posted at Colonial Acres Golf Course. If a Student application, parent/guardian must also sign below and agree to be responsible for student's actions.***

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

Parent Signature (if applicable) \_\_\_\_\_

**Mail application and payment in full to: Town of Bethlehem Parks and Recreation Dept.  
261 Elm Ave.  
Delmar, NY 12054**

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**INDICATE METHOD OF PAYMENT: CASH CHECK MC VISA DISCOVER**

*(Check payable to: Town of Bethlehem, \$20 fee for returned checks)*

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV # \_\_\_\_\_  
*(3 DIGIT # ON BACK OF CARD)*

Signature of card holder: \_\_\_\_\_