



For Office Use Only	
Form-complete	_____
Form-incomplete	_____
Fee	_____
Sub Approval	_____

**HERITAGE BAY GOLF & COUNTRY CLUB
TRANSFER OF MEMBERSHIP APPLICATION**

Form and fee must be received 30 days prior to transfer start date

MEMBER (OWNER) INFORMATION

Member's Last Name _____ **Member Number** _____

Heritage Bay Address (street and unit) _____

If Using Agency, Agent's Name _____

Emails to be Copied on Communications _____

Dates of Transfer: *Starting* _____ / _____ / _____ *Ending* _____ / _____ / _____ (30 days minimum)

**I UNDERSTAND THAT WHEN I TRANSFER MY MEMBERSHIP PRIVILEGES
I WILL BE UNABLE TO EXERCISE THOSE PRIVILEGES DURING THAT TRANSFER PERIOD.
IT IS MY INTENTION TO TRANSFER MY UNIT PRIVILEGES TO THE TRANSFEREE BELOW.**

SIGNATURE OF MEMBER **Date** ____/____/____

TRANSFER MEMBER (TENANT) INFORMATION

Transfer Member #1 Name _____

Transfer Member #2 Name _____

Dependents 21 and Under (and ages) _____

Home Address _____

TM #1 Cell _____ TM #2 Cell _____

TM #1 Email _____ TM #2 Email _____

Have You Rented In Heritage Bay Before? _____ If Yes: Most Recent Month/Year _____

\$325 Transfer of Membership Fee (payable by check or money order to Heritage Bay Golf & CC)
Submit this form with fee to: Heritage Bay Golf and CC, 10154 Heritage Bay Blvd., Naples, FL 34120, Attn: Marie

I will be living in the Heritage Bay residence listed above and I understand that during the period of Membership Transfer, I assume all of the privileges (golf & amenities) and agree to abide by all Rules and Regulations.

SIGNATURE OF TRANSFER MEMBER #1 **Date** ____/____/____

SIGNATURE OF TRANSFER MEMBER #2 **Date** ____/____/____