



## WARRIOR HILLS GOLF COURSE

1321 Corps Road, BLDG. 352  
Fort Johnson, LA 7159  
(726) 780-1281



### WARRIOR HILLS PRO MEMBERSHIP APPLICATION/AUTHORIZATION

NAME: \_\_\_\_\_ RANK: \_\_\_\_\_ RETIRED: \_\_\_\_\_ DoD: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TYPE OF MEMBERSHIP REQUESTED: INDIVIDUAL/SINGLE FAMILY

#### CURRENT 2025-2026 PRICING:

Rate:	Type:	Individual:	Family:
	Military Rank - E1-E5 / Junior Players	\$390	\$625
	Military Rank - E6 & Above	\$660	\$1,050
	DoD Civilians, Veterans & Retirees	\$660	\$1,050
	Guests / General Public	\$900	\$1,450

#### TYPE OF ID UTILIZED FOR RATE VERIFICATION:

Common Access Card (CAC)	Military Retiree ID
Armed Forces ID	State Issued Photo ID
Dependent ID Card	Other:

PAYMENT PLAN REQUESTED: ANNUAL MONTHLY

\*Monthly plans will include an additional \$5 administration fee per month.

ANNUAL MEMBERSHIP DUES (\$60 in savings)	
Total Amount Due:	
Member Start Date:	

MONTHLY MEMBERSHIP DUES	
Total Amount Due:	
Monthly Amount Billed:	
Member Start Date:	

#### FAMILY/DEPENDENT INFORMATION (ONLY IF FAMILY PLAN IS SELECTED):

SPOUSE NAME: \_\_\_\_\_ DEPENDENT #1: \_\_\_\_\_

DEPENDENT #2: \_\_\_\_\_ DEPENDENT #3: \_\_\_\_\_

DEPENDENT #4: \_\_\_\_\_ Did an existing Warrior Hills Pro Member refer you? If yes, who? \_\_\_\_\_

Thank you for your business!



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This Annual Membership agreement is a 12-month cycle beginning the day that you sign up and ending 365 days later. Annual Membership covers all daily green fees. Membership does not cover Cart Rental fees. This annual green fee payment is non-refundable. Exceptions include P.C.S. or change in physical status prohibiting the play of golf and medical validation from your PCM (Primary Care Manager) or physician is required. Memberships may NOT include all tournaments and/or events hosted by outside agencies other than MWR. Eligible dependents for family passes are determined in accordance with Army Regulation (AR 215-1). Dissatisfaction with the course accessibility, conditions or lack of participation does not constitute a refund.

I have read this application and understand the content; all information provided and submitted below is accurate and complete:

Initials: \_\_\_\_\_

**DETAILS AND REGULATIONS:**

1. Army Golf Business Operations are detailed in AR 215-1-1 4.3 Dated May 2018.
2. Membership or "Advanced Green Fees" application requires this signed form, customer information will be entered into household - RECTRAC, copy of proof of appropriate fee level in file, Copy of POS receipt of full payment in file or notation of current monthly billing cycle.
3. This file will be maintained for a minimum of 3 years.
4. Cart fees will not be discounted in any way and rainchecks, should they be issued, shall be at the discretion of the Warrior Hills Golf Course (WHGC) staff or management.
5. I agree, if approved for membership, to pay all dues and fees in accordance with the DFMWR / Warrior Hills Golf Course billing policy, which states "Any member account not paid in full by the close of business on the 10th day of the month will be assessed a \$25 late fee."
6. I agree, if approved for membership, to waive, hold harmless and release JRTC and Fort Johnson, the Directorate of Family and Morale, Welfare and Recreation, and their employees from any claims, damages or injuries arising out of/or-in connection with such membership activities including operating a golf cart. I understand that through such membership activities, all dependents listed on this application may be subject to various dangers or risks of personal injury, even fatality, as well as other injuries or damage. These risks and dangers have been considered by me, and I voluntarily choose to participate and assume all such dangers and risks.
7. This application, once completed, will contain Personal Identifying Information (PII) and will be kept secured and treated as such under and in accordance with Army Regulation.

**PRIVACY ACT STATEMENT:**

1. Authority: Power of Secretary of the Army to Issue Regulations, Authority: S U.S.C. 552(a)(11).
2. Principle Purpose: Form must be filled out by individuals applying for annual green fees at Warrior Hills Golf Course for the purpose of providing the facility with information necessary to complete processing.
3. Routine Uses: This form must be completed by individuals applying for annual green fees at Warrior Hills Golf Course, necessary for mission function
4. Mandatory or voluntary disclosure and effect on individuals not providing information: Without completion of this form, processing of application authorization and membership privileges will not be honored.

**With my signature below, I hereby request Membership:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This Membership Application shall not be binding upon the Club until the acceptance below is signed.**

**WHGC Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Warrior Hills Pro Membership Member Number Assigned:** \_\_\_\_\_

Thank you for your business!