

Krooked Kreek Golf Course

P.O. Box 26
Osceola, WI 54020
Phone: 715-294-3673
www.krookedkreek.com

2010 Course Information Club Pro and Manager: Mr. Bob Klund

Pass Type	Comments	2010 Cost if you Pay in Full before March 1, 2010	2010 Cost if you Pay in Full after March 1, 2010
Family	<ul style="list-style-type: none"> • Husband, Wife & one Child (child must still be in high school) • 3 Guest Passes 	\$915 + tax = \$965.33	\$960 + tax = \$1,012.80
	<ul style="list-style-type: none"> • Additional children may be added 	\$60 + tax = \$63.30 each	\$63 + tax = \$66.47 each
Couple	<ul style="list-style-type: none"> • Husband & Wife • 3 Guest Passes 	\$730 + tax = \$770.15	\$767 + tax = \$809.19
Single	<ul style="list-style-type: none"> • 2 Guest Passes 	\$515 + tax = \$543.33	\$541 + tax = \$570.76
College	<ul style="list-style-type: none"> • Must show a student ID • Must be enrolled as a full-time secondary school student • Must be under the age of 25 years 	\$245 + tax = \$258.48	\$257 + tax = \$271.14
Junior	<ul style="list-style-type: none"> • A junior pass is limited to persons under the age of 19 years 	\$185 + tax = \$195.18	\$195 + tax = \$205.73
Yearly Trail Fee	<ul style="list-style-type: none"> • Per Cart & Primary Driver 	\$235 + tax = \$247.93	\$247+ tax = \$260.59
	<ul style="list-style-type: none"> • Additional Driver 	\$60 + tax = \$63.30 each	\$63 + tax = \$66.47 each
Yearly Cart Rental	Must be purchased at the clubhouse – only the person who signs the agreement will be allowed the key		

- No one under the age of 18 years can operate a power cart.
- No carry on beverages.
- Proper attire must be worn at all times on the course
- No five-somes or > without permission.
- Any refund of memberships for medical reasons will be handled on a case by case basis and must be presented before June 1st 2010

Youth Restrictions

- Play without restrictions Monday – Friday anytime
- Play without restrictions Weekends and Holidays after 2:00 pm

Please fill out the below information, along with your payment and mail to Krooked Kreek. List the names of all who will receive a season pass:

-----Detach Here & Mail-----

Names: _____

Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

E-mail Address: _____

- Season Pass Type:
- Family
 - Husband & Wife
 - Single
 - College
 - Junior