

Rockingham Country Club

2019 Season Pass Packages

Weekday Season Pass- \$629

This season pass is good for up to 18 holes of daily golf play any time Monday through Friday, Noon and may book tee times up to 7 days in advance.

Seven-Day Season Pass - \$1,239

This season pass is good for up to 18 holes of daily golf play any time 7-Days a week and may book tee times up to 7 days in advance.

Twilight/Youth Season Pass - \$439

This season pass is good for up to 18 hole daily play seven days a week; after 3:00pm April, September, October & November, after 4:00pm May & August, and after 5:00pm June & July.

Cart Privileges

Season Pass holders may also purchase Cart Privileges allowing use of one seat in an electric cart.

Weekday Cart Pass (Monday- Friday, Noon): \$429

Seven Day Cart Pass: \$649

Twilight Cart Pass: \$299

Terms and Conditions

Peak Times are typically Friday, Noon through Sunday & Holidays during Peak Season (May- September). All passes are subject to restrictions and changes including, but not limited to: Passes valid only when the course is open to the public or league play, not valid during tournaments, Holidays, course sponsored events or other private functions. Passes are good for a maximum of 18-holes play per day. All Tee-Times are good for 9-holes with second 9-hole play subject to same-day availability. Carts and tee times may be limited due to weather or other factors. Season Passes and Season Pass payments are non-refundable. Season Passes are non-transferrable. Youth is defined as under the age of 18 at the time of purchase. Failure to adhere to RCC polices and management requests may result in the termination of Season Pass privileges. Tee- times take precedence over walk-in play. Threesomes and foursomes take precedence over singles and doubles. All organized play subject to course approval. Additional electric cart riders are subject to pro-rated cart fee. Other special offers may be made available throughout the season.

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2019 Season Pass Order Form

Season Pass Type: _____

Cart Pass Type: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email: _____

Amount Enclosed: _____

Payment Method: _____

Purchase Date: _____

Signature (*I have read the terms and conditions*)

Make Checks Payable to: Rockingham Country Club

Please send completed form to:

Rockingham Country Club

P.O. Box 483

Stratham, NH

03885