



**FY 2025 - SJC BOCC Employee Golf Program**

The St. Johns Golf Club once again offers St. Johns County **BOCC, Tax Collector, Property Appraiser, Clerk of Courts, Sheriff's Office, Supervisor of Elections and Fire Services Employees** an economical way to play golf and enjoy increased physical fitness. Full and part-time county employees, and their eligible dependents, (must be on the employees insurance), qualify to participate in this program through September 30, 2025. The program includes:

- 18 holes with a cart for a fee of \$27.50 per eligible person
  - Walking will be at the same rate
- 9 holes with a cart for a fee of \$19.50 per eligible person
  - Walking will be at the same rate

To register for the 2024 program please fill out the bottom of this sheet completely and either present when checking in at the Golf Course for the first time or scan and email to [wtucker@sjcfl.us](mailto:wtucker@sjcfl.us). If presenting for the first time when checking in, please allow staff ample time to enter you and your family into the POS system. After completing registration, the Employee Golf Program rate will automatically be applied to reservations made under your name.

**This form must be filled out annually regardless of previous registration in the program.**

Proper dress is required in all areas of the Golf Course: No swimwear, short shorts or tank tops are allowed. Shirts with collars are preferred for gentlemen. Shoes must be with soft soles with no metal spikes. No Athletic cleats, other than soft spike golf shoes are permitted.

*\*when playing at this rate you are representing the county and any poor behavior could result in the cancelation of your program privileges. This program can be ended at any time and must be reapplied for each year by providing current proof of employment.*

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Employee must sign to acknowledge that all information below is current: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee #: \_\_\_\_\_

Name of Dependent(s)<sup>1</sup> participating:

\_\_\_\_\_  
<sup>1</sup>Qualifying dependents are those who are enrolled on the BOCC health plan

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Department/Constitutional Office: \_\_\_\_\_

Supervisor: \_\_\_\_\_

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**Office use beyond this point:**

- Entered into Point of sales \_\_\_\_
- Entered into tracking \_\_\_\_