

2026 Peddie Golf Club Membership Programs



*Peddie Golf Club
is offering a variety of
value-oriented
packages, designed
for singles, couples,
juniors and families.*

*We are committed to
improving our
programs and
exceeding
expectations for your
overall club
experience.*

PEDDIE
— GOLF CLUB —

Enrollment Information:

609-664-6842 or kevin.compton@troon.com
www.peddiegolfclub.com

Peddie Golf Club | 671 Old York Road, East Windsor, New Jersey 08520

Full Membership

A membership for any person desiring full access to the golf course seven days a week at anytime. A Young Professional membership is available for anyone between the ages of 18-35.

Weekday Premier

A membership with access to the golf course anytime Monday - Friday and after 2:00 PM on Weekends & Holidays.

Junior Membership

A membership for children under the age of 18 for access to the golf course after 2:00 pm, seven days a week.



Peddie Golf Club Membership - 2026 Enrollment Application

Check One	Type	Price	Tax	Total
Full Golf Membership				
☐	Single	\$4,500.00**	\$298.13	\$4,798.13
☐	Family*	\$6,200.00**	\$410.75	\$6,610.75
☐	Young Professional	\$3,250.00**	\$215.31	\$3,465.31
☐	80 Plus	\$2,250.00**	\$149.06	\$2,399.06
Alumni & Current Peddie Parent				
☐	Single	\$3,250.00**	\$215.31	\$3,465.31
☐	Family*	\$4,850.00**	\$321.31	\$5,171.31
Weekday Premier				
☐	Weekday Membership	\$2,750.00**	\$182.19	\$2,932.19
Junior				
☐	Junior Membership	\$625.00	\$41.41	\$666.41

* Family Privileges are for spouse and any children living at home under the age of 25.

** \$60 Food Minimum Required from April-October

TOTAL AMOUNT ENCLOSED: \$ _____

Applicant Information

Name: _____ Member Number: _____

Street: _____ Date of Birth: _____

City: _____ State: _____ ZIP: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Payment Options (check one)

☐ Check Mail to: Peddie Golf Club | 400 Rike Drive, Suite 1-C, Millstone Twp, NJ 08535

☐ Credit Card Credit Card Type: ☐ Visa ☐ MasterCard ☐ Amex ☐ Discover

Credit Card No: _____ Expiration Date: _____

Signature: _____ V-Code: _____

Refund Policy- available upon request.

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