



2024 GOLF MEMBERSHIP APPLICATION FORM

MEMBER NAME(S):			
Member One:		Email:	
Member Two:		Email:	
Address:		Phone:	
City:			
Postal Code:			
MEMBERSHIP TYPE: (Please check one):			
<i>Adult – Full Time</i>	\$1220	<i>Senior - Full Time</i>	\$1090
<i>Adult – Weekday (excluding Holidays)</i>	\$1090	<i>Senior – Weekday (excluding Holidays)</i>	\$1010
<i>Adult Couple – Full Time</i>	\$2150	<i>Senior Couple - Full Time</i>	\$1940
<i>Adult Couple – Weekday (excluding Holidays)</i>	\$1920	<i>Senior Couple – Weekday (excluding Holidays)</i>	\$1780
<i>Intermediate (Ages 19-25)</i>	\$820	<i>Monthly - 3 Month</i>	\$700
<i>Junior (Age 18 & Under)</i>	\$400	<i>Monthly - 2 Month</i>	\$475
		<i>Monthly - 1 Month</i>	\$265
<i>*Please Specify Start Date for Monthly Memberships</i>			
ADD ONS (Please indicate quantity):			
<i>Seasonal Cart Membership – Single Member</i>	\$530	<i>Seasonal Cart Package – Couples Member</i>	\$950
<i>ADD ON - Range Membership</i>	\$175	<i>Non Member - Range Membership</i>	\$300
<i>Club Storage</i>	\$75		
FOR OFFICE USE ONLY:			
Membership Subtotal:			
Discounts:			
HST (13%)			
TOTAL:			
PAYMENT METHOD:			
CHEQUE		VISA/MC	
CREDIT CARD INFORMATION			
NAME ON CARD:			
CARD #:			
EXPIRY DATE (MM/YY):			
SIGNATURE:			