

CORNWALL GOLF & COUNTRY CLUB LIMITED

P.O. BOX 7226, CORNWALL, ONTARIO, K6H 7J3

(613) 931-1122

2008 APPLICATION FOR MEMBERSHIP

Date: _____

I, _____
(First Name) (Middle Initial) (Surname)

make application for membership in the Cornwall Golf & Country Club Limited as a:

Playing Member _____ OR Social Member _____

I hereby authorize my name to be proposed for membership in the Cornwall Golf & Country Club Limited, and if approved, agree to become a member. I hereby subscribe to and agree to be governed by the By-Laws, Rules and Regulations of the said Club which are now in force or which may hereafter be enacted. I authorize the Board of Trustees to hold my Common Share (\$50.00) in trust and to sell or transfer that share when I cease to be a paid up member of the Club.

(Signature of Applicant)

Home Address _____
(Street & No.) (Municipality)

Postal Code _____ Telephone _____

Business Firm Name _____

Occupation _____ Bus. Telephone _____

Email Address: _____

Date of Birth _____
(Day) (Month) (Year)

Proposed by Members: _____
(Name in Print) (Signature)

(Name in Print) (Signature)

Membership in Previous Clubs:

Club Name: _____ No. of Years: _____

NOTES: -Every Senior Playing member must be a shareholder.

-New members with limited or no golf experience will be required to take lessons from the golf pro.

-By signing this form, the applicant allows the insert of their name, playing status and phone # in the annual logbook of Cornwall Golf and Country Club Ltd. The book is for the exclusive use of Cornwall Golf and Country Club members and staff and is not to be shared with and/or distributed to any outside parties and/or agencies without the written authorization of the Privacy Officer

LOOKING FORWARD TO HAVING YOU AS A NEW MEMBER!