



SUMMERSIDE GOLF & COUNTRY CLUB

P.O. Box 1628
 Summerside, P.E.I. C1N 2V5
 (902) 436-2505; FAX: (902) 888-2413

2009 MEMBERSHIP APPLICATION FORM

(GST Registration #88968 2522 RT0001)

Name in full:	_____		
	(Please Print)		
Mailing Address:	_____		
City & Province:	_____	Postal Code:	_____
Email Address:	_____		
Telephone #:	_____		
I would like a charge account	<input type="checkbox"/>	yes	<input type="checkbox"/> no
Credit Card #:	_____	Expiry Date:	_____

	Golf Fee	GST	PST	Association Dues	Total
<input type="checkbox"/> Adult	\$ 799.00	39.95	83.90	27.00	\$ 949.85
<input type="checkbox"/> Adult Couples	\$ 1,518.00	75.90	159.39	54.00	\$ 1,807.29
<input type="checkbox"/> Shoulder Season	\$ 399.00	19.95	41.90	27.00	\$ 487.85
<input type="checkbox"/> Student	\$ 399.00	19.95	41.90	27.00	\$ 487.85
<input type="checkbox"/> Junior 11 +	\$ 275.00	13.75	28.88	13.00	\$ 330.63
<input type="checkbox"/> Junior 7 - 10	\$150.00	7.5	15.75	0	\$173.25

50% of Golf Fees are payable on first day of play and the balance must be paid in the form of a credit card number or postdated cheque dated on / before June 15th.

The undersigned, upon acceptance to membership as indicated, hereby agrees to abide by the bylaws, rules and regulations of the Club.

Signature: _____ **Date:** _____

