

Office Use Only

Account:

Cert #'s:

Issue Date:



Phone: 382-7787 Fax: 382-7415

www.moonlakegolf.com

Regular/Corporate Membership Application

Applicant Information

Member/Contact Name:

Date of Birth:

Company Name:

(This name will appear on certificates)

Contact Name:

Current Address:

Email:

City:

Province

Postal Code

Phone:(home)

Phone: (work)

Fax:

Talk Mail: Keep informed of upcoming events. Provided to members by SaskTel free of charge.**Spouse Information, if Couple Membership**

Name:

Date of Birth:

Telephone: (work):

Email:

Type of Membership Information**Shareholder Membership****Season Ticket Membership****Corporate Membership**

Full Week

Weekday

Single

Senior Couple

Corporate 40 Rounds

Couple

Student

Corporate 50 Rounds

Senior

Junior

Corporate 60 Rounds

S.G.A. Card Required

Notes:

Miscellaneous

Locker

Power Cart Full Seat

Club Cleaning & Storage

Power Cart Single Seat

Driving Range (non members)

Cart Storage & Trackage (1998 and previous members only)

Payment Details

Membership \$

Power Cart Full Seat \$

Single Seat \$

Locker \$

Club Cleaning & Storage \$

Cart Storage & Trackage \$

Other \$

TOTAL \$

Cash

Cheque

Visa

M/C

AMEX

Other

I agree to abide by all the rules and regulations stipulated by Moonlake Golf and Country Club Ltd. I will not hold Moonlake Golf and Country Club Ltd. responsible for any loss of personal property stored at the Club.

Signature of Applicant:

Date: