

GALIANO GOLF COURSE

24 St Andrews Crescent, Galiano, BC V0N 1P0

MEMBERSHIP APPLICATION (2020)

Member Applicant #1

Name(s): _____ Returning Member
(No Address or email Changes)
Address: _____
City: _____ Prov: _____ Postal: _____
Email Address: _____

Member Applicant #2

Name(s): _____
Email Address: _____

Please submit completed form along with payment to **Galiano Golf Course** to the Clubhouse.

| Membership Type | Quantity | Fee | Gst | Line Total |
|--|----------|-----------|-----------|-----------------|
| INDIVIDUAL: | _____ | \$ 520.00 | + 26.00 = | \$ 546.00 _____ |
| JUNIOR (Under 19 as of May 1 st): | _____ | \$ 95.00 | + 4.75 = | \$ 99.75 _____ |
| POST SEC STUDENT: (Verified registration to any post secondary school by September 2020) | _____ | \$ 275.00 | + 13.75 = | \$ 288.75 _____ |
| SENIOR (75+ as of May 1 st): | _____ | \$ 475.00 | + 23.75 = | \$ 498.75 _____ |
| FAMILY (Incl Spouse/children of either): | _____ | \$ 995.00 | + 49.75 = | \$1044.75 _____ |
| DUAL (1 guest included with playing member at any time) | _____ | \$ 995.00 | + 49.75 = | \$1044.75 _____ |
| CORPORATE: (Up to 4 designated individuals that are employed at the business allowed unlimited play.) | _____ | \$1045.00 | + 52.25 = | \$1097.25 _____ |
| SOCIAL/BRIDGE: | _____ | \$ 130.00 | + 6.50 = | \$ 136.50 _____ |
| TOTAL AMOUNT: | | | | _____ |
| Add Donation (Thank You!): | | | | _____ |

PAID BY: CASH CHEQUE DEBIT M/C VISA TOTAL PAID: _____

I/We have read the "Assumption of risk, exclusion of liability, waiver and release" and I/We the undersigned have read and agree to accept the terms of the waiver and release.

Member# 1: _____ Date: _____

Member#2: _____ Date: _____