



2019 GOLF MEMBERSHIP APPLICATION FORM

MEMBER NAME(S): (Please include date of birth)	
Member One: _____ mm / dd / yy	Email:
Member Two: _____ mm / dd / yy	Email:
Address:	Home Phone:
City:	Business Phone:
Postal Code:	Referred By (if applicable):

MEMBERSHIP CATEGORY: (Please put a checkmark beside desired membership category)					
	Before Mar 1	After Mar 1		Before Mar 1	After Mar 1
Unlimited Individual – 7-day	1,995	2,195	Unlimited Couple – 7-day	3,495	3,695
Unlimited Individual – Weekday	1,795	1,995	Unlimited Couple – Weekday*	3,195	3,395
Afternoon (after 12pm) – 7-day	1,395	1,495	Sunset* (after 4pm) – 7-day	895	995
Unlimited Early Executive (age 30-39)	1,295	1,395	Unlimited Intermediate (age 19-29)	895	995
Junior (age 14-18)	395	445	Junior Jr. (age 13 and under)	295	345
Corporate (number of members _____)			Family Junior (age 18 & under with adult member)	250	250

*Weekday membership includes tee times after 2pm on weekends and holidays

Club Storage (optional)	Clubs Only	160	160	Power Cart Plan	Unlimited - \$550	550	575
	Clubs w/ Push Cart/Caddy	185	185		9 Hole - \$350	350	375

OFFICE USE ONLY:	Membership Subtotal:	
	Admin Fee (payment plan only):	
	HST (13%):	
	TOTAL:	

SELECT ONE OF THE FOLLOWING PAYMENT OPTIONS:

Option #1 - SINGLE PAYMENT	Option #2 – Six (6) EQUAL PAYMENT PLAN (\$90 Admin. Fee Applies) Deadline for payment plan option is April 30 th , 2019	
CASH/CHEQUE	Credit Card Information for Payment Plan:	
DEBIT	Credit Card #:	
VISA/MC/AMEX	Expiry:	Security Code (CVC):
Credit Card Information for Single Payment:	*Payments plan can only be administered using Credit Cards.	
Card #:		
Expiry:	Security Code (CVC): <small>on back of card</small>	I/We as the above account holder(s), do hereby authorize Legacy Ridge Golf Club Inc. to debit my bank account/credit card for payment of my golf membership. This authorization may be cancelled at any time by written notice or full payment of the amount owing.
Signature	Signature	Date

2019 CHARGING PRIVILEGES SET UP

Credit card information is required for charging privileges

Club account charging privileges are available for Pro Shop and Food & Beverage Purchases. Legacy Ridge Golf Club Inc. may at its sole discretion grant or terminate credit at any time.
Legacy Ridge Golf Club will issue members monthly statements of account, account balance and statements can also be viewed online at anytime. All purchases charged to your account in one month are due by the 15th day of the subsequent month. For your convenience, any outstanding balance remaining on your account on the 15th day will be automatically processed as a charge to the credit card provided below. Please be advised a 15% gratuity may be added to your Food & Beverage purchases.

Credit Card Information: Same as card above

Credit Card #: _____ Exp Date: _____ Security Code(CVC): _____

I hereby agree to the following:

- To sign all receipts when making food and beverage and golf shop purchases that are being billed to my account.
- To allow Legacy Ridge Golf Club Inc. to charge directly to the credit card specified above, any or all of my unpaid balance under the above terms.
- To inform Legacy Ridge Golf Club Inc. of any changes to billing information such as address and credit card information (ie. Expiry Date).

Signature _____ Date _____

Signing and submitting this application I agree to abide by the rules, policies, terms and conditions set out by Legacy Ridge Golf Club Inc. Please note LRGCC Inc. is not liable for lost, stolen or damaged golf equipment or property stored on the premises. Items left at own risk.

Signature _____ Date _____