



2027 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		2,850		3,050		Unlimited Couple – 7-day		4,950		5,150	
Unlimited Individual – Weekday		2,650		2,850		Unlimited Couple – Weekday*		4,650		4,850	
Unlimited Early Executive (age 30-39)		2,150		2,250		Unlimited Intermediate (age 19-29)		1,750		1,850	
Junior (age 14-18)		650		700		Junior Jr. (age 13 and under)		550		600	
Corporate (number of members _____)						Family Junior (age 18 & under with adult member)		350		400	
*Weekday membership includes tee times after 2pm on weekends and holidays											
Club Storage (optional)	Clubs Only	375		425		Power Cart Plan (per seat)	Unlimited	1,100		1,150	
	Clubs w/ Push Cart/Caddy	425		475			9 Hole Only	700		750	
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 (\$120 Admin. Fee Applies) Deadline for payment plan option is April 30 th , 2027							
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): on back of card		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 _____			
2027 CHARGING PRIVILEGES SET UP											
Credit card information is required regardless of whether member chooses to charge or not											
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: (1) To sign all receipts when making food and beverage and golf shop purchases that are being billed to my account. (2) 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. (3) 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 LRGC Inc. is not liable for lost, stolen or damaged golf equipment or property stored on the premises. Items left at own risk. Signature _____ Date _____											