



2020 NEW MEMBER APPLICATION

___ Full Membership
___ Trial Annual
___ Sp. Intermediate

PRINCIPAL INFORMATION:

Principal Surname
Address
Home Phone
Date of Birth (m) (d) (y)
Emergency Contact
Food Allergies

Principal First Name
Postal Code
Cell Number
E-Mail
Emergency Phone
Would you like to rent a locker? fee will apply
[] Full locker [] Half locker

Employment:

Employer & Position

Business Phone

FAMILY INFORMATION:

Spouse's Surname
Spouse Member [] Yes [] No
Spouse's E-mail
Food Allergies

Spouse's First Name
Date of Birth (m) (d) (y)
Cell Phone
Would you like to rent a locker? fee will apply
[] Full locker [] Half locker

Child Surname
Date of Birth (m) (d) (y)
[] Male [] Female \ \ \ Golfing [] Yes [] No
Food Allergies

Child First Name
E-Mail
child member - e-mail is required for Golf Canada

Child Surname
Date of Birth (m) (d) (y)
[] Male [] Female \ \ \ Golfing [] Yes [] No
Food Allergies

Child First Name
E-Mail
child member - e-mail is required for Golf Canada

HISTORY:

Do you currently have a Golf Canada membership? [] Yes [] No
If yes, which Club is the membership connected?
If yes, which e-mail is the membership connected?
I am known to the following members of Willow Park Golf & Country Club:
1) 2)

Please remit a non-refundable deposit of \$2,000 with this application.
I agree to pay the Membership Entrance Fee of the year that my playing privileges commence.
I have read, understood and agree to the Rules & Regulations.

Applicant's Signature Board Approval

Date of Application Date of Approval