

Membership & League Application

Date: _____

Name: _____

Email: _____

Name: _____

Email: _____

Address: _____ Unit# _____

City: _____

Postal Code: _____

Phone: _____

Alternate Phone: _____

Category (Please check)

Adult: _____

Senior: _____

Student: _____

Junior: _____

Membership Type (Please check)

Unlimited: _____

Weekday: _____

Associate: _____

League Only: _____

League of Interest (Please check if joining a league)

Men's Monday: ___ Women's Monday: ___ Men's Tuesday: ___ Women's Tuesday/Wednesday: ___

Permission to share phone numbers with league participants: Yes: _____ No: _____

Permission to share email addresses with league participants: Yes: _____ No: _____

Rentals (Please check)

Weekday Seasonal Powercart (\$450/seat): _____

Seasonal Pull Cart (\$40): _____

7 Day Seasonal Powercart (\$600/seat): _____

Seasonal Club Storage (\$125): _____

Signature: _____

Signature: _____

Please Note: HST is extra on all Memberships, Rentals, and League Fees.

Please make your cheque payable to: **Llyndinshire Golf & Country Club**
Box 155
Arva, ON N0M 1C0