

**SPRING LAKES GOLF CLUB 2021 JUNIOR MEMBERSHIP FORM**

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

RETURNING MEMBERSHIP # \_\_\_\_\_ IF NO, NEW MEMBERSHIP # \_\_\_\_\_  
(Office Use Only)

RESIDENCE ADDRESS \_\_\_\_\_  
STREET # \_\_\_\_\_ STREET NAME \_\_\_\_\_ APT. \_\_\_\_\_  
CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

HOME TELEPHONE NUMBER \_\_\_\_\_ MOBILE NUMBER \_\_\_\_\_

TO RECEIVE CLUB EMAILS, NOTIFICATIONS, ETC. \_\_\_\_\_  
BY EMAIL PLEASE PRINT YOUR EMAIL ADDRESS \_\_\_\_\_

2021 Junior Intermediate Application Form

A. **Junior Membership 18 years old and under** – Clubhouse and Practice Facilities **\$ 460** \_\_\_\_\_  
Pre-paid golf fees 7 days per week. Note: must be enrolled in school

B. **MANDATORY GOLF ASSOCIATION DUES** **\$30** \_\_\_\_\_

RENTAL SERVICES – please put an X beside your choice and extend amount.

C. **LOCKERS** 3- foot size locker \_\_\_\_\_ \$85.00  
Locker #: \_\_\_\_\_ 5- foot size locker \_\_\_\_\_ \$140.00

D. **CLUB STORAGE** \_\_\_\_\_ \$105.00  
Storage# \_\_\_\_\_

**Subtotal of selected amounts** \_\_\_\_\_

**Add 13% of subtotal for HST** \_\_\_\_\_  
HST# 77244 8122 RT 0001

**TOTAL AMOUNT OWING** \_\_\_\_\_

***NOTE: PLEASE READ THE FOLLOWING AND SIGN AND DATE FORM BELOW***  
**CONDITIONS OF MEMBERSHIP**

- 1. Members assume no financial responsibility for the operation of the Club and agree to pay fees and dues as set out;
- 2. Junior Members must be 18 years old or younger;
- 3. Members and their guests will abide by the dress code and observe the rules of the Club;
- 4. By signing this form, I hereby agree to pay any outstanding charges generated by myself or my guests at Spring Lakes Golf Club during the year;
- 5. The club opens no later than May 1<sup>st</sup> and closes no earlier than October 31<sup>st</sup> each season – pending COVID restrictions;
- 6. No cart privilege unless accompanied by an adult member;

I HAVE READ, UNDERSTAND, AND ACCEPT THE ABOVE CONDITIONS AND WILL ABIDE BY THE RULES OF THE CLUB.

Signature of Member \_\_\_\_\_ Date \_\_\_\_\_

**METHOD OF PAYMENT**

<b>OFFICE USE ONLY</b>	
Payment Amt. Rec'd _____	Date _____
Method of Payment _____	B# _____ <input type="checkbox"/>