



2024 MEMBERSHIP FORM

DATE: _____

NAME: _____

D.O.B.: _____

TEL.: _____

EMAIL: _____

MEMBER ID (OFFICE ONLY): _____

COUPLES MEMBERSHIP? If yes, please fill out the below fields. A different email is required for Golf Canada memberships.

NAME: _____

EMAIL: _____ TEL.: _____

MEMBER ID (OFFICE ONLY): _____

MEMBERSHIP TYPE(S) (PLEASE CHECK ALL APPLICABLE):

BASE MEMBERSHIP (\$1400)

U30 MEMBERSHIP (\$1100)

JUNIOR MEMBERSHIP (\$400)

ADD-ONS

10 CART PUNCH CARD (\$173.91)

POWER CART MEMBER (\$750)

RANGE MEMBERSHIP (\$200)

ACCEPTED FORMS OF PAYMENTS FOR INSTALLMENTS

Debit cards are not an acceptable form of payment. Installment applications without a fully completed payment form will be rejected and your membership will be null and void.

2025 MEMBERSHIP FORM

INSTALLMENT FORM



You agree to pay for the golf membership listed above (pg. 1) in equal installments with your credit card. You must pay your first installment today. The next installment will be charged to your credit card after the Island Coastal Golf Division office receives this signed agreement on the 1st of the month. The subsequent installments will be charged to your credit card the 1st (or following business day) of each subsequent month with the final installment being charged on October 1.

You will provide your credit card information with this agreement. Debit cards are not accepted for installments. The Island Coastal Golf Division will keep that information on file for the sole purpose of charging your card for your membership on the dates mentioned.

You will contact the Island Coastal Golf Division if the credit card provided is lost or stolen, or if the credit card numbers or details change in any way. You will make payment for all amounts charged if the credit card provided expires or is invalid.

You will not be entitled to your membership, or the benefits provided, until a missed installment is paid.

By signing this agreement, you acknowledge and accept full responsibility for these terms and guarantee payment for your membership. The Island Coastal Golf Division may pursue all avenues of collection, including the use of collection agencies if you fail to pay.

CARDHOLDER NAME: _____

CREDIT CARD NUMBER _____

EXPIRY ___ / ___

CVV ___ ___ ___

SIGNATURE: _____

OFFICE USE ONLY:

MEMBERSHIP DUES: \$ _____ AMOUNT PER MONTH: _____

HST (15%): \$ _____ ADDED TO VAULT?

TOTAL: \$ _____ ADDED DATA KEY?

NOV DEC JAN FEB MAR APR

MAY JUN JUL AUG SEP OCT