



# THOMPSON GOLF CLUB

## 2022 MEMBERSHIP

Name of Applicant \_\_\_\_\_

Partner \_\_\_\_\_

Junior(s): \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: 204- \_\_\_\_\_

Postal Code: R8N- \_\_\_\_\_ Home Phone: 204- \_\_\_\_\_

Email: \_\_\_\_\_

Name of Junior Sponsor: \_\_\_\_\_

Type of Membership: \_\_\_\_\_ QTY \_\_\_\_\_ TOTAL \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cart Path Fees \_\_\_\_\_

Club Storage \_\_\_\_\_

SUBTOTAL \_\_\_\_\_

GST @ 5% of Subtotal \_\_\_\_\_

Fundraising Assessment (\$120.00) \_\_\_\_\_  
(all adult memberships)

**TOTAL**

\_\_\_\_\_

Payment Method: \_\_\_\_\_ Card Number \_\_\_\_\_

Expiry: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

Agent \_\_\_\_\_