



Victoria Park Golf Club West

Membership Application

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: (____) _____ E-Mail: _____

Date of Birth: _____ (Month/Day/Year)

____ 7 Day \$1300.00 ____ 5 Day \$1080.00

____ 4 Day \$940.00 ____ Junior \$500.00

*Prices subject to applicable taxes.

Additional Services:

Club Storage: Regular Cart__\$125.00 Power Caddy__ \$150.00

Driving Range Packages__ 20 Tokens \$82.00 (**\$28.00 in Savings!**)

*Prices subject to applicable taxes.

Please check the items that apply to your Membership and place total on line provided. Applicable taxes are included in prices quoted above.

Membership Dues: _____ + taxes _____

Total Fees Submitted: _____

____ Pre-authorized Credit Card Payment(s)

Credit Card Information: Visa____ Mastercard____ American Express____

Credit Card Number _____ Expiration Date _____

Cardholder Name _____ Date _____

I have read and accepted all of the above information. With my signature authorize Victoria Park Golf Club West to charge my Credit Card for the above amount. The Club will not be responsible for any injuries incurred while on the premises. All Members are required to obey the rules of golf, all local rules as set by Victoria Park Golf Club West. The Management reserves the right to cancel any membership for any just reason.

Signature _____ Date _____

Please complete application in full, and return to club with payment