

Application

Company: _____

Primary Contact: _____

Title: _____

Mailing Address: _____

City: _____ Province/State: _____ Postal/Zip Code: _____

Telephone: _____ Fax: _____ Email: _____

Website: _____

MEMBERSHIP CATEGORY/ANNUAL DUES (please indicate which category)

- NATIONAL \$1,500 plus applicable tax
- CHAPTER \$500 plus applicable tax

* TAX (based on your location)

BC	12%
AB, SK, MB, QC, PE	5%
ON, NB, NL	13%
NS	15%

For Chapter Corporate Membership (please indicate Chapter)

- British Columbia
- Prairie
- Central Ontario
- Quebec
- Alberta
- Southwestern Ontario
- Eastern Ontario/Outaouais
- Atlantic Canada

METHOD OF PAYMENT

- Cheque enclosed
- MasterCard
- VISA
- American Express

Credit Card Number: _____ Expiry: _____ CSV#: _____

Cardholder Name: _____

Applicant Signature: _____

Date: _____

Please email or fax application to:

National Golf Course Owners Association Canada

105-955 Green Valley Crescent, Ottawa, ON K2C 3V4

Tel: (613) 226-3616 Toll Free: 866-626-4262 Fax: (613) 226-4148