

NGCOA CANADA MEMBERSHIP APPLICATION

GOLF FACILITY / COMPANY

Course or Company Name: _____

Courier Address (no P.O. Box): _____

City: _____ Province: _____ Postal Code: _____

Facility Tel: _____ Facility Fax: _____ Website: _____

PRIMARY CONTACT

Name: _____ Title: _____

Telephone: _____ Fax: _____ Email: _____

*Please indicate below if the main contact mailing address differs from the facility address:

Mailing Address: _____

Preferred method of communications: English French / Email Fax

Course Owner(s) (if different from above): _____

Referred by: _____

FACILITY TYPE

9 holes / Par 3 / Driving Range 18 holes 27 holes 36 holes

over 36 hole operation. Please indicate # of holes _____

Public Semi-Private Private

OWNERSHIP TYPE

Privately Owned Member Owned Government Owned (please check one below)

Federal Provincial Municipal

MEMBERSHIP TYPE

FOR PROFIT: open to private owners or lessors of profit oriented golf facilities

NOT FOR PROFIT: open to member owned or government golf courses

Year Opened _____ **Total # of Holes at Opening** _____

INVESTMENT: Membership dues are pro-rated, based on an August 1st renewal.

***TAX (based on your location)**

9 holes / Par 3 / Driving Range \$192.50 plus applicable tax
18 holes \$382.50 plus applicable tax
27 holes \$457.50 plus applicable tax
36 holes \$562.50 plus applicable tax

Over 36 hole operation add \$35.00 per each additional 9 holes exceeding 36 holes.

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

*Above rates are subject to change without notice. GST/HST #89503 9253RT0001

PAYMENT

Cheque enclosed MasterCard VISA American Express

Credit Card #: _____ Expiry: _____ Security Code #: _____

(3 digits back of card)

Cardholder Name: _____ Applicant Signature: _____

CONTACT US AT

National Golf Course Owners Association Canada
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