



COUNTRY HILLS

Principal Member Application Form

I hereby apply for Shareholder Membership in Country Hills Golf Club (the "Club") by completion of this Application and the delivery of a non-refundable \$5,000.00 deposit

I hereby confirm that I have read the Club's "Articles of Association", "Rules & Regulations" and "Waiting List - Rights & Obligations" and further agree to be bound by these documents and any changes or additions as approved by the Board of Directors of the Club, or by the Shareholders at a General Meeting.

I hereby tender my deposit of \$5,000.00, which I understand shall be non-refundable in the event that I do not purchase a Share in the Club when a Share is offered to me. When offered a share for purchase, the \$5,000.00 will be credited to the then-applicable Share purchase price. I will have 30 days to pay the remaining balance of the Share price before the \$5,000.00 becomes forfeit.

PLEASE NOTE THAT YOUR DEPOSIT MUST ACCOMPANY YOUR APPLICATION

NAME: _____
(please print)

ADDRESS: _____

CITY/TOWN: _____ POSTAL CODE: _____

HOME PHONE: _____ BUS. PHONE: _____ CELL PHONE: _____

EMAIL:
Home _____ Business _____

Signature of applicant: _____

Witness: _____ *Name (please print)* _____

***NOTE: The share price is subject to Board approval and may change from time to time subject to market value consideration.**

/please turn over ->

Please complete the following information:

1. Do you know any members of Country Hills Golf Club who would be willing to act as a reference?

Yes _____ No _____ If yes, please list names:

2. Have you ever been a member of a golf club? Yes _____ No _____ If yes, please give the club name(s):

3. What is your official handicap or index? _____

4. What is your principal reason for choosing Country Hills Golf Club? _____

I hereby give my permission for a representative of Country Hills Golf Club to contact the references given.

Signed: _____

Dated: _____

Witness: _____

Name: _____

(Please print)

Please indicate which members of your family (spouse/unmarried children residing with you) who will be included in your golfing membership.

NAME	DATE OF BIRTH	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

This Application accepted by Country Hills Golf Club this _____ day of _____ 20____

COUNTRY HILLS GOLF CLUB

Application Number (office use only) _____

per: General Manager