



Celebrating 100 years!

2024 MEMBERSHIP APPLICATION

Sand Point Golf & Country Club Inc.
38 Golf Club Rd.
Braeside, ON K0A 1G0

Contact Information:

Name	
Telephone	
Email Address	
Current Residential Address	
Birth Date: (DD/MM/YY)	

Name <i>(Applicable for "Couples Membership")</i>	
Telephone	
Email Address	
Current Residential Address	
Birth Date: (DD/MM/YY)	

Selected Membership Type : **Golf Canada + 100th Anniversary Bag Tag Included in All Membership Types**

Selected Packages and/or Add Ons :

Please contact the Pro Shop for information regarding Membership Perks, Play Restrictions and Non-Membership Golf Packages

Payment Options:

Cheque: Make payment out to SAND POINT GOLF & COUNTRY CLUB INC.

Debit/Credit Card: Card Number _____ EXP _____ CVV _____

** For Visa and Mastercard payments, you must provide your 16 Digit Card Number, Expiration Date and CVV Number if you are NOT paying in person.*

E-Transfer: Email proshop@sandpointgcc.ca

Member Signature (s) _____

Date _____

Mailing Address: 38 Golf Club Rd. Braeside, ON K0A 1G0

Tele. (613) 623-3234

E: proshop@sandpointgcc.ca

Receiver Initials _____