

**Sioux Lookout Golf & Curling Club**

Application for Membership

---

**MEMBERSHIP DETAILS**

PLEASE PRINT CLEARLY AND IN BLOCK LETTERS

---

Title (Mr/Mrs/Ms/Miss/Dr/Sir) \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (w) \_\_\_\_\_ Phone (h) \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

---

**MEMBERSHIP TYPE**

FORMER SHARE HOLDER:

Please list your shares and indicate whether you wish to activate the new membership or not.

Share type _____	certificate # _____	Activate	Yes:	No:
Share type _____	certificate # _____	Activate	Yes:	No:
Share type _____	certificate # _____	Activate	Yes:	No:
Share type _____	certificate # _____	Activate	Yes:	No:
Share type _____	certificate # _____	Activate	Yes:	No:

---

MEMBERSHIP TRANSFERRED

Transferred from which member: \_\_\_\_\_

Number of membership transferred: \_\_\_\_\_

Transfer fee: \$50 + annual fee: \$50

**TOTAL TRANSFER FEE: \$**

---

NEW MEMBERSHIP

General membership Joining fee: \$1,000 (annual fee waived for one year)

**TOTAL NEW MEMBERSHIP FEE: \$**

\_\_\_\_\_  
Signature