

MITCHELL GOLF AND COUNTRY CLUB

81 Frances St. W. Box 38 Mitchell, Ontario N0K 1N0
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 golf@mitchellgolfclub.com

2012 GOLF SEASON FEE SCHEDULE

	<u>Paid in full by:</u> <u>JAN. 31/2012</u>		<u>After:</u> <u>JAN. 31/2012</u>	
MALE _____	\$ 695.00+hst=	\$ 785.35	\$ 795.00+hst=	\$ 898.35
FEMALE _____	\$ 695.00+hst=	\$ 785.35	\$ 795.00+hst=	\$ 898.35
COUPLES _____	\$1190.00+hst=	\$1344.70	\$1340.00+hst=	\$1514.20
FAMILY ...Includes Spouse (Junior 16 & under – add \$110 each +hst)_	\$1190.00+hst=	\$1344.70	\$1340.00+hst=	\$1514.20
INTERMEDIATE ... (Age 23-28) _____	\$ 415.00+hst=	\$ 468.95	\$ 445.00+hst=	\$ 502.85
STUDENT ... (17- 22 yrs.) _____	\$ 300.00+hst=	\$ 339.00	\$ 325.00+hst=	\$ 367.25
JUNIOR ... (16 yrs. & under) _____	\$ 215.00+hst=	\$ 242.95	\$ 250.00+hst=	\$ 282.50
JUNIOR ... Child of Paid Adult Member (16 yrs. & under) _____	\$ 150.00+hst=	\$ 169.50	\$ 175.00+hst=	\$ 197.75

GOLF SEASON IS FROM APRIL 1 (WEATHER PERMITTING) TO OCTOBER 31.

Ages for Junior / Student / Intermediate ... as of Jan. 1/12

LOCKERS _____	Large	\$ 65.00+hst= \$73.45
	Small	\$ 40.00+hst= \$45.20

NOTE: Lockers must be paid prior to May 15, 2012 ... or prior to moving equipment in ... which ever is first. Lockers not paid for by May 15, 2012 will be reassigned.

DRIVING RANGE... Yearly Membership (PER PERSON)

_____	Golf Members	\$170.00+hst= \$192.10
_____	Non- Golf Members	\$220.00+hst= \$248.60

Max. 2 buckets per day – individual use only

YEARLY GOLF CART LEASE -\$595.00 per year + hst (\$672.35) **excluding** tournaments (Max. 18 holes per cart per day)

* A Yearly Golf Cart Lease Agreement must be signed upon payment. Payment in **FULL** required at start of lease.

PLEASE FILL IN THIS SECTION COMPLETELY!

I, _____ hereby make application for membership in the
 NAME PRINT SIGNATURE
 Mitchell Golf and Country Club for the 2012 Season, in the following classification:

Check () _____ Male _____ Female _____ Family _____ Intermediate
 _____ Couples _____ Junior _____ Student

List names of Players and Birth Dates covered by this application.

NAME _____ BIRTH DATE _____

NAME _____ BIRTH DATE _____

MAILING ADDRESS _____ CITY _____ POST. CODE _____

PHONE _____ E-MAIL _____

(Please ensure your application is signed)

CREDIT CARD PAYMENT: VISA MAST AMEX

CARD # _____ EXP. DATE _____

NAME ON CARD _____ TOTAL AMT. _____

DATE TO PROCESS PAYMENT _____

SIGNATURE (FOR CREDIT CARD) _____ DATE _____

For office use only ...

DATE PAID _____ AMT. PAID _____ VISA MAST AMEX DEBIT CHQ CASH GIFT CERT.

GF/CART TICKETS GIVEN _____ 2 _____ 4 _____ STAFF SIGNATURE _____