**BLACKHORSE GOLF & COUNTRY RESORT**

**2022 Membership Fees** (As of September 19, 2021)

All Pricing Subject to HST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **FULL MEMBERSHIP TYPE** | **OPTION #1**Pay by Dec 1/21 | **OPTION #2**Pay by April 30/22 | **OPTION #3**Pay after May 1/22 | **OPTION****AMT. PD.** |
|  | **Adult** Single*(Unlimited Play)* Couple | $1225$2025 | $1300$2075 | $1350$2150 |  |
|  | **Intermediate** (Age 19-29)*(Unlimited Play)* (Age 30-39) | $800$1000 | $825$1025 | $875$1050 |  |
|  | **9 Hole** Single(Some restrictions) Couple | $825$1450 | $850$1500 | $875$1600 |  |
|  | **Junior**  (Age 13-18)(Unlimited Play) (12 & Under) | $325FREE\*Conditions apply  | $325FREE | $325FREE |  |
|  **SENIORS PROGRAM Age 60+ as of April 1/22** **Age 75+ Save additional** **3% OFF PRICES BELOW** All Pricing Subject to HST |
|  | **FULL MEMBERSHIP TYPE** | **OPTION #1**Pay by Dec 1/21 | **OPTION #2**Pay by April 30/22 | **OPTION #3**Pay after May 1/22 | **OPTION****AMT. PD.** |
|  | **Adult** Single*(Unlimited Play)* Couple | $1125$2025 | $1200$2075 | $1250$2150 |  |
|  | **9 Hole** Single*(Some restrictions)* Couple | $825$1450 | $850$1500 | $875$1600 |  |

|  |
| --- |
| **GROUP, CORPORATE & FAMILY MEMBERSHIPS AVAILABLE**Contact Pro Shop at 519-395-0009  |
| **Cart Options**  1 PersonNew Cart Policy \*\*\*\* Couple9 Hole – 1 Person9 Hole – Couple | $800$1150$575$775 | $850 $1225$600$850 | $875$1250$625$850 |  |
| **Club Storage** Without Cart With CartNon-Folding Cart | $75$100$150 | $75$125$175 | $85$125$175 |  |

NOTE: ALL ABOVE MEMBERSHIPS ARE SUBJECT TO APPLICABLE TAXES. All age categories as of April 1, 2022. Prices subject to change without notice. Special rates not to be used in conjunction with any other offers.

\*\*\*\* Cart registered to a couple can be used 36 holes max. per day or 18 holes per registrant without additional charges – 9 hole members half of that.

 APPLICATION ON REVERSE

**BLACKHORSE GOLF & COUNTRY RESORT**

1436 Bruce Rd. #1, Kincardine ON, N2Z 2X5

Tel# 519-395-0009, Fax: 519-395-5965

E-mail: info@blackhorsegolf.ca

**2022 Membership Application**

Type of Membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Option #\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List Names of Players (with birth dates for Juniors, Intermediates & Seniors) covered by this application

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province: \_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Tel #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bus Tel #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Power Cart Membership Name Single: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2nd Person if Applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Agreement/Waiver Form (see attached) must accompany this application

**PAYMENT OPTIONS:**

CASH CHEQUE VISA MASTERCARD DEBIT

NAME ON CREDIT CARD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VISA OR MASTERCARD (PLEASE CIRCLE)

CREDIT CARD #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CVS# (3 digit)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EXPIRY DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AMOUNT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_