



2017 Membership Application

P.O. Box 100
Berwick, N.S.
B0P 1E0
Phone: (902)847-9000
Fax: (902)847-9005

Name(s): _____

Mailing Address: _____

Town/City: _____ Postal Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Email address: _____

Date of Birth: _____

****All rates include HST****

Memberships:

| | | |
|--|----|----------|
| Regular Member - Unlimited Play | \$ | 930.00 |
| Weekday Member – Monday to Friday only | \$ | 825.00 |
| New Member – Unlimited Play (not a member of BHGC for at least 4 years) | \$ | 675.00 |
| 2 nd year New Member | \$ | 775.00 |
| Dual (with proof of membership at another club) | \$ | 650.00 |
| Couples Regular Membership | \$ | 1,780.00 |
| Couples Weekday Membership | \$ | 1,595.00 |
| Student Membership (ages 19 – 25 with valid student ID) | \$ | 500.00 |
| Junior Membership (up to/including age 18)* | \$ | 150.00 |

Private Cart Storage:

NO FENCING FEES

| | | |
|---|----|--------|
| Trail Fees* - one owner or two family members | \$ | 210.00 |
| Trail Fees* - shared ownership between two people | \$ | 289.00 |

Rentals / Storage

| | | |
|---|----|--------|
| Annual cart rental* - Single person | \$ | 850.00 |
| Annual cart rental* - husband/ wife | \$ | 995.00 |
| Pull cart rental for the season | \$ | 50.00 |
| Club Storage for the season | \$ | 115.00 |
| Member Drive Cart Package (10 round pass) | \$ | 250.00 |

RangeToken Packages:

| | | |
|------------------------------------|----|--------|
| 25 Tokens – Member rate | \$ | 75.00 |
| 50 Tokens – Member rate | \$ | 119.00 |
| Seasonal Range package for Members | \$ | 150.00 |

TOTAL AMOUNT OWING \$ _____

** indicates there is additional paperwork to be signed prior to use or storage of cart.
Prices are subject to change*

I hereby apply for/or renew membership at Berwick Heights Golf Course for the 2017 season. I agree to abide by all rules, regulations and signage at Berwick Heights. My membership fees must be paid in full prior to golfing at Berwick Heights, unless you have chosen to use the payment plan option. Full refunds will not be issued once a membership is purchased. By signing this membership application, you, the member, waive any claims with respect to holding Berwick Heights Golf Course, its employees or directors, liable for personal injury, death, property loss or damages which may occur at Berwick Heights Golf Course.

Signature _____

(Applicants under 18 years of age must have a parent or guardian sign)

Date _____

Method of Payment: Cash / Cheque / Visa / MasterCard / Amex

Card # _____

Exp. Date _____

Total amount: \$ _____