



Trafalgar GOLF & COUNTRY CLUB LIMITED PARTNERSHIP

Membership Application – Resident Member

TO: Trafalgar Golf and Country Club Limited Partnership
(the “**Partnership**”)

Trafalgar Golf and Country Club Limited
(the “**Corporation**”)

I hereby apply for membership at Trafalgar Golf and Country Club (the “**Club**”), a golf and country club operated by the Partnership. The category of membership for which I am applying is as follows:

- Unrestricted Resident Member
- Unrestricted/Restricted Couple
- Restricted Executive Resident Member
- Corporate Resident Member
- Social Golf Member

In consideration of the acceptance by the Partnership of my application, I acknowledge and agree as follows:

1. I acknowledge that the Club is owned and operated by the Partnership. I also acknowledge that the property on which the Club is located is owned by the Corporation and leased by the Corporation to the Partnership. I acknowledge and agree that membership in the Club provides each member with the right to use the Club’s facilities in accordance with the Membership By-laws, Rules and Regulations established from time to time, but does not provide a member with any other rights or any proprietary, ownership or equitable interest in or to the property and assets of either the Partnership or the Corporation.
2. I acknowledge that I have been provided with a copy of the current Club Membership By-laws, Rules and Regulations. I agree to abide by the Membership By-laws, Rules and Regulations. I acknowledge that the Membership By-laws, Rules and Regulations may be amended or replaced from time to time in accordance with their terms and agree to abide by such amended or replacement by-laws, rules and regulations.
3. I agree to pay the initiation fees as set out in this application and I agree to pay annual fees and expenses related to my membership in the Club in accordance with the Membership By-laws, Rules and Regulations.

FAX
(905) 878-1699

BOX 56, MILTON, ONTARIO L9T 2Y3

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Trafalgar

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4. I acknowledge that the Partnership has provided to me the Club's Initiation Fee Policy, which policy sets forth the Partnership's commitment to refund a portion of my initiation fee if the events described in the policy arise.
5. I understand that my membership is not transferable.
6. I acknowledge that the golfing and club privileges granted to me as a member of the Club may be withdrawn by the Partnership, in its discretion, for non-payment of fees or expenses or for any violation by me, or by any guests that I bring to the Club, of the Membership By-laws, Rules and Regulations.
7. I certify that the information that I have provided to the Partnership in connection with this application is complete and accurate and not misleading in any respect. I agree that I will advise the Partnership if there is any change to this information. I agree that the Partnership may verify the accuracy of the information that I have provided in connection with this application, including by obtaining additional information from credit bureaus and other credit information sources.
8. I acknowledge and agree that the Partnership may retain and use the personal information that I provide to it in connection with my membership in the Club for the purposes of the administration of the Club including, without limitation, the periodic publication of a membership directory for the use of Club members. I agree that the Club may use my personal information for commercial purposes related to the operation of the Club as approved by the Club's executive. I acknowledge that the Partnership will from time to time publish a Privacy Statement for the Club which will outline the policies of the Partnership relating to the collection and use of personal information of members of the Club and I agree to be bound by such policies so long as they are approved in accordance with the Membership By-laws, Rules and Regulations.
9. I agree that no member of the Trafalgar Group shall have any liability to me in respect of any actions, claims, damages, expenses or other liabilities of any kind whatsoever ("Claims") which arise at any time from and after the date hereof from or as a result of my membership in the Club or my participation in any activity at or organized by the Club, whether or not the same may have been contributed to or occasioned by the negligence or willful misconduct of any one of them. I also agree that I will indemnify and defend each member of the Trafalgar Group from and against any Claims which arises or results from any action or failure to act on my part in connection my participation in any activity at or organized by the Club. The members of the Trafalgar Group shall be the Partnership (including, Trafalgar Golf Management Inc. ("TGMI"), its general partner), the Corporation and any partner, shareholder, director, officer, employee, agent or representative of the Club, the Partnership, TGMI or the Corporation.

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Signature of Applicant: _____ **Date:** _____

Proposed by: _____
Print Name:

Seconded by: _____
Print Name:

Seconded by: _____
Print Name:



Trafalgar GOLF & COUNTRY CLUB LIMITED PARTNERSHIP

CREDIT CARD INFORMATION

Visa

MasterCard

AME
X

Credit Card # _____ Expiry: _____

Name on Card _____

Signature _____ Date _____

FOR OFFICE USE ONLY

Deposit Rec'd Yes
\$ _____

Dependent Name _____ Option 2 Billing Yes No

Comments _____

PRIVATE AND CONFIDENTIAL

Name in Full _____

Occupation _____

Name of Firm _____

Billing Address _____

Postal Code _____

Home Address Same as above

Postal Code _____

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Trafalgar
GOLF & COUNTRY CLUB
LIMITED PARTNERSHIP

Home Phone Number _____

Business Phone Number _____

Date of Birth _____

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Trafalgar GOLF & COUNTRY CLUB LIMITED PARTNERSHIP

Other Clubs to which Applicant has belonged

Position held in above Club _____

Locker

- Full size locker
- Half size locker
- No Locker

Junior (Ages 13-18)

Ages 19-25

Intermediate (

Child's Name _____ Child's Name _____

Birth Date _____ Birth Date _____

Child's Name _____ Child's Name _____

Birth Date _____ Birth Date _____

Child's Name _____ Child's Name _____

Birth Date _____ Birth Date _____

Child's Name _____ Child's Name _____

Birth Date _____ Birth Date _____

Note: Proof of birth date to be included with application

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