



# Lake Point Golf & Country Club Membership Registration Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Work/Cell: \_\_\_\_\_

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

[Click Here For Current Rates](#)

Name	Type of Membership	Date of Birth DD/MM/YYYY	Price

Cart Shed Storage #		
Tracking Fee		
Locker #		
Subtotal		
HST – 12%		
Visa <input checked="" type="checkbox"/> MC <input checked="" type="checkbox"/> Card Number <span style="margin-left: 100px;">Expiry Date</span> <span style="margin-left: 100px;">Total Due</span>		