

2019 New Member Application – Pre Authorized Debit (PAD)

Limited Time Offer - Expires February 28th 2019 **8 Equal payments March – October – After initial down payment**

2019 Membership - Please make note of the following:

- Memberships will be available and open to the public for a down payment and monthly instalments. Limited # of spaces available in Gold, Silver, Bronze and Copper categories.

Membership Payment Method: Payment accepted via Pre Authorized Debit.

Membership Entitlements

A Membership at Kedron Dells entitles Members to:

- Play unlimited golf rounds
- GAO Handicap Indexing
- Participate in Member organized Tournaments
- Note: Bronze & Copper Members may participate in the following Weekend Tournaments without charge: The Member Opening & Closing Tournaments and the Club Championship (2 day event).
- Bronze Members – Weekends after 5:00 pm
Weekday Bronze Members have been given an extra Perk to play after 5:00 pm (no sooner) on Weekends/Holidays. This time will be moved forward in October (after 4:00 pm) & November (after 3:00 pm).

Membership Rates:

The following Membership Rate Schedule will be in effect until February 28, 2019.

Here is how it work's;

Single Member only \$300.00 down payment

Couple Member's only \$500.00 down payment

Find the membership that best suits your needs at the club for the 2019 season.

Multiply the membership price by 1.13 to add HST

Subtract the deposit off of the total \$300.00 for a single or \$500 for a couple.

Divide the total by 8 to give you the monthly payment for the season.

EX 1: "Copper" under 60 years old \$1385.35

$\$1385.35 \times 1.13 = \1565.45

$\$1565.45 - \text{Deposit } \$300.00 = \$1265.45$

$\$1265.45 / 8 \text{ Months} = \158.18

Monthly Payment Only \$158.18

EX 2: "Copper" Over 60 years old \$1178.65

$\$1318.35 \times 1.13 = \1489.74

$\$1489.74 - \text{Deposit } \$300.00 = \$1189.74$

$\$1189.74 / 8 \text{ Months} = \148.72

Monthly Payment Only \$148.72

Philip J. Brown

General Manager

(905) 728-6641 (ext. 103)

phil@kedrondellsgolfclub.ca

Membership Rates: Memberships will be subject to availability.
HST is extra on all Pricing contained in Application. D.O.B. = date of birth

COPPER MEMBERSHIP

**Weekday 5 DAY - Valid Weekdays (Mon.-Fri.) after 1:00 pm
 not valid on Holidays Maximum 32 Members**

Restricted/Limited Memberships	Rate	
*Adult (under age 60) D.O.B.: 1960 or later	\$1385.35	C1
*Spousal 5% discount rate D.O.B.: 1960 or later	\$1252.35	C1A
**Senior (over age 60) D.O.B.: 1959 or earlier	\$1178.65	C2
**Spousal 5% discount rate D.O.B.: 1959 or earlier	\$1119.25	C2A

BRONZE MEMBERSHIP

**Weekday 5 DAY – Valid Weekdays (Mon.-Fri.) Anytime
 not valid on Holidays Maximum 84 Members**

SINGLES	Rate	
Adult (under age 60) D.O.B.: 1960 or later	\$2014.10	B1
Senior (over age 60) D.O.B.: 1959 or earlier	\$1914.00	B2
Senior (over age 75) D.O.B.: 1944 or earlier	\$1626.90	B3
COUPLES		
Adult (under age 60) D.O.B.: 1960 or later	\$3304.40	B4
1 Adult (under age 60) & 1 Senior (over age 60)	\$3220.25	B5
Senior (over age 60) D.O.B.: 1959 or earlier	\$3136.10	B6
1 Senior (over age 60) & 1 Senior (over age 75)	\$2889.15	B7
Senior (over age 75) D.O.B.: 1944 or earlier	\$2642.20	B8

SILVER MEMBERSHIP

**Full 7 DAY Membership - Valid Anytime Weekdays & on
 Weekends/Holidays after 12:00 pm
 Maximum 20 Members**

SINGLES	Rate	
Adult (under age 60) D.O.B.: 1960 or later	\$2412.30	S1
Senior (over age 60) D.O.B.: 1959 or earlier	\$2294.60	S2
COUPLES		
Adult (under age 60) D.O.B.: 1960 or later	\$3912.43	S3
1 Adult (under age 60) & 1 Senior (over age 60)	\$3820.03	S4
Senior (over age 60) D.O.B.: 1959 or earlier	\$3727.35	S5

GOLD MEMBERSHIP

**7 DAY Membership - Valid Anytime Weekdays & on Weekends/Holidays before
 8:00 AM (or within the first 2 hours of tee times, whichever is later) & after 12:00 pm
 Maximum 20 Members**

SINGLES	Rate	
Adult (under age 60) D.O.B.: 1960 or later	\$2816.00	G1
Senior (over age 60) D.O.B.: 1959 or earlier	\$2670.53	G2
COUPLES		
Adult (under age 60) D.O.B.: 1960 or later	\$4218.78	G3
1 Adult (under age 60) & 1 Senior (over age 60)	\$4072.20	G4
Senior (over age 60) D.O.B.: 1959 or earlier	\$3925.90	G5

I (We), hereby apply for membership in Kedron Dells Golf Club, Oshawa, in the category circled below for the 2019 season, which expires November 30th 2019. I (we) agree to abide by the rules and regulations governing play as posted and acknowledge the right of management to cancel membership at its discretion upon returning any unused portion of the membership fee. Memberships voluntarily withdrawn prior to the season or not used during the season cannot be refunded, whatever the reason. Payment method: Pre Authorized Debit

By virtue of my signature below, I acknowledge that I am purchasing a Seasonal Membership for the 2019 Season (expiration: November 30, 2019) and that I am responsible for full payment of the Annual dues for the Membership category indicated.

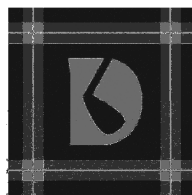
APPLICANT #1	
Name:	Date of Birth (D.O.B.): Proof of I.D. Required for Intermediate, Student, Junior & Senior Rates
Address:	
City:	
Postal Code:	Telephone:
E-mail:	

SIGNED DATED

APPLICANT #2	
Name:	Date of Birth (D.O.B.): Proof of I.D. Required for Intermediate, Student, Junior & Senior Rates
Address:	
City:	
Postal Code:	Telephone:
E-mail:	

SIGNED DATED

MEMBERSHIP TALLY – please tally all items selected	
ITEM CODE eg. (A1)	Amount \$
	\$
	\$
<i>Subtotal</i>	\$
<i>HST (13%)= subtotal x 13%</i>	\$
<i>Minus Deposit</i>	\$
<i>Subtotal</i>	\$
<i>Divided by 8</i>	\$
<i>Monthly Total</i>	\$
TOTAL MEMBERSHIP DUES	\$



**KEDRON
DELLS GOLF CLUB**

2400 Ritson Rd. N,
Oshawa, ON L1H 8L7
Tel: (905) 728-6641
www.kedrondells.com

Philip J. Brown, General Manager (February 4th 2019)



2400 Ritson Road North
Oshawa, Ontario L1H 0N8
(905) 728-6641

1. Customer Information (please print clearly):

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____

E-mail Address: _____

2. Bank Account Information:

Financial Institution Number (3 Digits): _____

Financial Institution Name: _____

Financial Institution Branch Address: _____

Deposit Account Number: _____

Branch Transit Number: _____

Chequing Account: Savings Account:

3. Pre-Authorized Debit (PAD) Details

You, the Payor, authorize Kedron Dells Golf Club to debit the bank account identified above for \$_____ on the 1st of the month beginning _____ 1st, 20____ and ending on _____ 1st, 20____.

These services are for (check one) _____personal _____business use

You, the Payor, may revoke your authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit www.payments.ca.

Signature of Account Holder:

Signature of Joint Account Holder (if applicable)

Name: _____
(Please print)

Name: _____
(Please print)

Date: _____

Date: _____

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.payments.ca