



Date Received (for office use only):

2020 Membership Application

Primary Member Information

Primary Member Name: _____ Birth Date (mm/dd/yy): _____

Address: _____
(Street) (City) (Postal Code)

E-mail Address: _____

Phone Number: _____
(Home Number) (Cell Number) (Business Number)

Occupation: _____ Employer: _____

Spouse & Dependant Members

Spouse Member Name: _____ Birth Date (mm/dd/yy): _____

E-Mail Address: _____

Phone Number: _____
(Home Number) (Cell Number) (Business Number)

Occupation: _____ Employer: _____

Caregiver Name: _____

Children Information:

1. _____ Birth Date (mm/dd/yy): _____

2. _____ Birth Date (mm/dd/yy): _____

3. _____ Birth Date (mm/dd/yy): _____

4. _____ Birth Date (mm/dd/yy): _____

Referred by: _____ (only one member reference per application)

How did you hear about The Waegwoltic Club? _____

Entrance Fee Options:

- **Option A:** Your annual **Membership Dues** plus your full Club **Entrance Fee**.
- **Option B: (Membership Incentive Plan):** Your annual **Membership Dues** with your entrance fee spread over a **5-year payment plan**. Members who do not wish to return are responsible to pay the full amount of the entrance fee upon cancellation of their membership.
- **Option C: (Trial Membership):** Your annual **Membership Dues** (with no entrance fee for the trial period) plus a **25% premium** that can be converted to an entrance fee payment for 2021.

	Option A		Option B	Option C
Categories	Annual Dues	Entrance Fee	2020 Membership Incentive Plan includes annual dues + 5-year payment plan for entrance fee	Trial Membership annual dues + 25% premium (no entrance fee)
<i>Family</i>	1,190.00	1,225.00	1,435.00	1,487.50
<i>Adult</i>	690.00	612.50	812.50	862.50
<i>Adult Married</i>	1,060.00	1,225.00	1,305.00	1,325.00
<i>Senior</i>	565.00	612.50	687.50	706.25
<i>Senior Married</i>	850.00	1,225.00	1,095.00	1,062.50
<i>Intermediate Adult</i>	530.00	-	-	-
<i>Family Add-on</i>	370.00	612.50*	492.50*	462.50
<i>Student Membership</i>	380.00	-	-	-
<i>Out of Town Membership (4 weeks)</i>	585.00	-	-	-
<i>Caregiver Add-on</i>	205.00	-	205.00	256.25

*Prices *do not* include HST and are subject to change

*An **Entrance Fee** is charged for **Family Add-ons** over the age of 30.

Monthly Payment Plan: Contact Kim Weeks, Controller, for monthly payment options, at kim@waegwoltic.ca or 902.429.2822 (ext. 3).

For any additional information or to submit completed application forms contact Lisa Baker, Office Manager at lisa@waegwoltic.ca or 902.429.2822 (ext. 0).

Signature (Primary Member): _____

Date: _____