

# Savage Creek Senior Men's Golf Club

## Membership Application Form

(Your name will go on the waiting list according to the date your application is received by the Membership Chairman.)

**(Please print)**

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street City Postal Code*

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ (Minimum age for membership is 50 years)

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

Please indicate your present or previous occupation \_\_\_\_\_

I will need of a golf cart to be scheduled, Please circle **Yes** or **No**

**The foursomes and tee times are determined by random draws each week.**

The success of the club depends entirely upon the active participation of its members. For example, there are several Executive positions in the Club. The leadership, organizational skills, and dedication of all of the Executive help to make golfing fun, and will help promote camaraderie within the club. Please let us know where you would like to help:

\_\_\_\_\_

If accepted as a member, I agree to comply with the golfing etiquette and By-Laws of the Savage Creek Senior Men's Golf Club.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail your application to the address below or drop it in at the Check-in Counter at Savage Creek.

WEB site is: **scsmgc.com** For more information call Terry Greenslade at 604-241-9550.

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### Mailing Address

Savage Creek Senior Men's Golf Club,  
Box # 143, 185 - 9040 Blundell Road,  
Richmond, B.C. V6Y 1K3