



Savage Creek Senior Men's Golf Club Membership Renewal Form

2027

Membership Renewal Fee is \$125.00.

It's time to re-up. Payment is by cash, cheque or etransfer. If by cash, drop it off at the Starter's Table. If by cheque drop it off at the Starter's Table or mail it to the address below. Please use the current date (do not post-date) and make your cheque payable to **Savage Creek Senior Men's Golf Club**. No initials such as SCSMGC please, as the bank will return the cheque. Or pay at the AGM. If paying by etransfer, please use name: Doug Ellis, email: treasurer.savagecreek@gmail.com. Be sure to include your name.

Savage Creek Senior Men's Golf Club
PO Box 128, Unit 3080
11666 Steveston Highway
Richmond B.C
V7A 5J3

Receipt of your payment confirms your membership in the Club.

Cut—Off Date for Submitting Your Payment is October 31, 2026.

In all cases, fill in this form and drop it at either the Starter's Table, mail it (to the address above) or scan it and email it to savagecreek seniormens@gmail.com. As usual Members will be able to view the Membership List detailing members' names, numbers, contact phone numbers and email addresses on the Club's website. It is password protected. In protecting the privacy of our members, we require that members DO NOT print copies of the Membership List, nor share it with any non-members or organizations. Please indicate below whether you approve of having your information included on the Membership List.

I agree to have my member number, name, contact phone number and email address listed on the Club's website (circle your choice): YES NO

I will require a power cart (circle your choice): YES NO

SCSMGC requires all members to be fully Covid vaccinated. By submitting this form, I attest to being fully Covid vaccinated. Also, by submitting this form, I attest to my intention to review and comply with the Golfing Etiquette and Bylaws of Savage creek Senior Men's Golf Club.

Contact Info. Fill in below:

Your Name:

Former Occupation:

Telephone:

Email:

Emergency Contact: Name:

Telephone:

Date: