



THE CARDINAL
AT SAINT JOHN'S

THE CORPORATE CLUB

MEMBERSHIP APPLICATION

COMPANY _____

ADDRESS _____

CITY & STATE & ZIP _____

PHONE _____

**Please complete the information below.

CORPORATE TEAM EXECUTIVE INFORMATION:

PRIMARY NAME & TITLE _____

PRIMARY PHONE & EMAIL _____

EXECUTIVE 2 NAME & TITLE _____

EXECUTIVE 2 PHONE & EMAIL _____

EXECUTIVE 3 NAME & TITLE _____

EXECUTIVE 3 PHONE & EMAIL _____

EXECUTIVE 4 NAME & TITLE _____

EXECUTIVE 4 PHONE & EMAIL _____

PLEASE MARK ADDITIONAL PREFERENCES:

- Team Building Challenges on the Putting Course
- Team Building Challenges on the Little Cardinal
- Team Meeting Space Monthly
- Partnering with Saint John's Resort as a Sponsor for Golf Events
- Room Blocks for 2024

TERMS & CONDITIONS:

By signing this application, you acknowledge and agree to abide by the rules and regulations of The Cardinal at Saint John's. You also understand that the information provided in this application will be used to enhance your golfing experience and may be shared with the relevant departments for that purpose. Privileges are subject to change.

Once application is approved, your membership can be secured through payment of remitted cheque. That is when your membership will become active.

Signature: _____ Date: _____

Thank you for choosing The Cardinal at Saint John's Resort, and we look forward to providing you with an exceptional golfing experience!