

Sponsored Intermediate Application

To be completed by the Sponsoring Member:

I, _____ wish to sponsor an Intermediate for the 2021 season.

Print Name

- Sponsored Intermediate B (19-28)
- Sponsored Intermediate C (29-35)

- I would like the sponsored player to have signing privileges on my account
- The sponsored player will provide their own credit card for all Club charges

Signature of Sponsoring Member: _____ Date: _____

To be completed by the Sponsored Intermediate:

Name: _____ Title: _____ Date of Birth: _____
(month/day/year)

Address: _____ City: _____ Postal Code: _____

Telephone: _____ Alt. Phone: _____ Cell: _____

Email Address: _____

Referral: _____

*(If you were referred by an existing member please list them above.)**

Signature of Sponsored Intermediate: _____ Date: _____

**As per our Referral Program, your referring member is eligible to receive Guest Passes for your referral. Please note that only ONE member is eligible to receive the referral benefit.*

