



2026 MEMBERSHIP



Club de golf Summerlea

1000, route de Lotbinière
Telephone : (450) 450-455-0921
www.summerlea.com

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INFORMATION DETAILS – MEMBERSHIP**INFORMATION**

First name	Last name	Date de birth Day ____ / Month ____ / Year ____
Address	City	Postal code
Email address	Billing <input type="checkbox"/>	News & info <input type="checkbox"/>
Email address 2	Billing <input type="checkbox"/>	News & info <input type="checkbox"/>
Home phone	Mobile phone	
Driver's license number	Already a member of Golf Canada? Card number :	

If you are not sponsored by a club member, please provide us with the names of two references.

Name	Length of acquaintance	Social or business relationship	Telephone
Name	Length of acquaintance	Social or business relationship	Telephone
Relationship, if any, to current member(s)			

CORRESPONDENCE

FRENCH _____ ENGLISH _____

SPOUSE	Date of birth : Day ____ / Month ____ / Year ____	
	Telephone :	Address courriel :
	Requesting a golf membership? Yes ____ No ____	Do we invoice for a Golf Canada membership? (for handicap) Yes ____ No ____

Already a member of Golf Canada?
Card number :

CHILD	Name :		Date of birth : Day ____ / Month ____ / Year ____
	Requesting a golf membership? Yes ____ No ____	Do we invoice for a Golf Canada membership? (for handicap) Yes ____ No ____	Already a member of Golf Canada? Card number :

CHILD	Name :		Date of birth : Day ____ / Month ____ / Year ____
	Requesting a golf membership? Yes ____ No ____	Do we invoice for a Golf Canada membership? (for handicap) Yes ____ No ____	Already a member of Golf Canada? Card number :

CLASS OF MEMBERSHIP

Please indicate for which class you are applying

CATEGORY	
<input type="checkbox"/>	Regular 7-day
<input type="checkbox"/>	Couple – Regular 7-day
<input type="checkbox"/>	Regular 5-day Plus
<input type="checkbox"/>	Couple – Regular 5-day Plus
<input type="checkbox"/>	Family 20 rounds
<input type="checkbox"/>	Twilight (7 days/week) after 2 pm

INTERMEDIATE MEMBER	
<input type="checkbox"/>	Intermediate (36-42)
<input type="checkbox"/>	Intermediate associate (36-42) *
<input type="checkbox"/>	Intermediate (31-35)
<input type="checkbox"/>	Intermediate associate (31-35) *
<input type="checkbox"/>	Intermediate (26-30)
<input type="checkbox"/>	Intermediate (19-25)

* Intermediate associate members who join with an Intermediate member must reside at the same address

JUNIORS	
<input type="checkbox"/>	Junior (12-18)
<input type="checkbox"/>	Independent Junior (Includes membership for a non-playing parent)
<input type="checkbox"/>	Pre-junior (8-11)
<input type="checkbox"/>	Pre-junior (6-7)

The date of November 1st is used to determine eligibility. Please provide proof of age with your application.

Not available
Trial membership: (Maximum 2 years)
Access restriction : After 12pm weekends and holidays (Bag storage locker optional)
Option 9-9-5 (9) x 9-holes, (9) x18-holes & 5 group lessons
20 rounds (of 18 holes)

CARTS
<input type="checkbox"/> VIP cart package (unlimited carts)
<input type="checkbox"/> Special 20 half carts for 9 holes, 10 half carts for 18 holes or combination

IMPORTANT INFORMATION

<ul style="list-style-type: none"> A \$500 fee will be charged for any category changes once your membership billing has begun. A minimum food & beverage spend ("barbill") applies. Golf Canada membership is required, and we will invoice this cost to your member account. If you are already a member of Golf Canada, it is very important that you provide us your card number (information page) to prevent double invoicing. For categories with a specified number of rounds, the unused rounds are not brought forward to the next season. 	Initials
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Authorization

I authorize the Club de golf Summerlea to occasionally conduct credit checks for the purpose of obtaining and receiving information from any financial institution, credit bureau, information agency, or person with whom I may have conducted financial transactions, including my criminal history, all in connection with this application.	Initials
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Are you currently a member or were you previously a member of another golf club? If yes, what is the name of the club and for how many years were you a member at this club?

Have you ever had a criminal record?

Yes ☐

No ☐

MEMBER COMMITMENT

I am applying for membership at the Club de golf Summerlea. I agree to abide by all policies, rules, and regulations at all times and acknowledge that decisions regarding my membership may be made for any reason, without recourse on my part.

I agree to pay the applicable membership fees and all expenses incurred when they are due. I acknowledge that golf fees will be billed in installments and must be paid immediately upon billing for my membership to remain active. I acknowledge that all golf fees must be paid in full before I can access the golf course.

I acknowledge that use of Summerlea's facilities is permitted only if my account is kept current and that any failure to pay on time may result in the termination of my club access and privileges. I acknowledge that they will not be refundable in any way, notwithstanding any interruption of my membership for any reason whatsoever, and that they will not be directly or indirectly related to any use of the facilities or services.

I also acknowledge that any resignation or change in Club membership must be received by the Club in writing by midnight on September 30 of each year. All amounts owed on the date I cease to be a member of the Club de golf Summerlea shall be immediately due and payable without further notice or formality.

Applicant signature

Printed name

Date