



Black Diamond
GOLF CLUB

2026 Membership Application

APPLICANT #1		APPLICANT #2	
Name:		Name:	
Date of Birth: (Intermediate & Junior Members Only)		Date of Birth: (Intermediate & Junior Members Only)	
Address:		Address	
City:	Postal code:	City:	Postal code:
Email:		Email:	
Telephone:		Telephone:	

I (We) hereby apply for membership in **Black Diamond Golf Club** for the **2026** season, **which expires November 30, 2026**, I (We) agree to abide by the rules and regulations governing play as the posted and acknowledge the right of the management to cancel membership at its discretion upon returning any unused portion of the membership fee. Memberships voluntarily withdrawn prior to the season or not used during the season **cannot be refunded**, whatever the reason. **Payment method: Cheque/Debit/Credit Card - Cheques should be made payable to Black Diamond Golf Club and to the address noted below. PLEASE SIGN BELOW**

Signature(s): _____

Date: _____

Signature(s): _____

Date: _____

Important: Prices subject to change without Notice

705 Pontypool Road, Pontypool Ontario L0A 1K0 Bus: (705)932-2005 Toll Free:(888)932-2005

Email: admin@blackdiamondgolfclub.ca Website: www.blackdiamondgolfclub.ca

NEW MEMBERSHIP