



Big Bay Point Golf Club
3912 30th Sideroad
Innisfil, Ontario
L9S 2Y6
705-436-1378

Men's Night Membership Application Form

Application Date: _____

First Name: _____ Last Name: _____

Home Address: _____

City: _____ Postal Code _____

Telephone: _____ Cell: _____

Email Address: _____

Occupation: _____

Date of Birth: _____

Do you know any current members of Big Bay Point Golf Club? Please list them:

Emergency Contact Information – In case of emergency on Club property

The Point is better golf.

Contact Name: _____ Relationship: _____

Telephone: _____ Cell: _____

Men's Night Member Signature:

I understand and will comply with the Men's Night Membership Program, as outlined by Big Bay Point Golf Club. I confirm that all the information I have completed on the Men's Night Membership Application Form is accurate and true.

Signature: _____ **Date:** _____

Thank you for your completed Men's Night Member Application form.
You can email completed forms to proshop@bigbaypointgolf.com or drop it off to the pro shop.

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