



## 2021 RESTRICTED PASS HOLDER

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone: Res. \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Restricted Tee Time Privileges

Golfing privileges schedule:

Monday – Tuesday	Unrestricted
Wednesday – Friday	Before 12:00 PM
Weekends & Holidays	After 1:00 PM.

7 Day advance booking privileges for weekday and weekend play.

Restricted Pass Holders who play outside of this schedule will pay regular green fee rates. The Pass Holder is **NOT** a member of Lakeside Golf Club and does not share in any of the member privileges.

### APPLICATION & LIABILITY WAIVER

I hereby voluntarily assume all risks of accident or damage to my person or property and that of my family and guests during such time that I am a restricted pass holder of **Lakeside Golf Club**. I waive all rights, claims, damages, actions and suits that I may have, and forever discharge, hold harmless and indemnify 645622 Alberta Ltd., Manager of **Lakeside Golf Club**, its partners, members, officials, agents and employees from all such damage, injury, claims or loss of any kind which I or my family or guests may sustain for any reason arising out of our use of the facility or equipment provided by **Lakeside Golf Club**.

SIGNED AND DATED AT \_\_\_\_\_, Alberta on the \_\_\_\_\_ day of \_\_\_\_\_, 2021.

Signature \_\_\_\_\_ Witness \_\_\_\_\_

### CREDIT CARD AUTHORIZATION

I hereby authorize Lakeside Golf Club to charge the agreed amount onto my credit card for the Restricted Pass.

Name of cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

Credit Card No: \_\_\_\_\_ Expiry: \_\_\_\_\_ CVV: \_\_\_\_\_

**2021 Rate - \$1,895.00+ GST = \$1,989.75**