

MEMBERSHIP APPLICATION



Category: **Full** **Resort** **Lifestyle** **Golf** **Corporate Y | N**

Primary Member 1:

Name _____ **Title** _____ **Date of Birth** _____

Home Email _____ **Home Phone** _____ **Cell** _____

Home Address _____ **Post Code** _____

Company Name _____ **Work Phone** _____

Work Email _____

Primary Member 2:

Name _____ **Title** _____ **Date of Birth** _____

Home Email _____ **Work Email** _____

Company Name _____ **Work Phone** _____ **Cell** _____

Children under 23:

Name	Date of birth	Signing Privileges
_____	_____	Y / N
_____	_____	Y / N
_____	_____	Y / N
_____	_____	Y / N

I understand the terms and conditions outlined in this document

Signed _____ **Print Name** _____ **Date** _____

Requested Commencement date of membership _____

CREDIT CARD DETAILS



Name of Cardholder (as it appears on the credit card): _____

Cardholder billing address: _____

Credit Card Type: **Visa** **Mastercard** **Amex**

Credit Card Number: _____ Expiry date: (MM/YY): _____

CVC Number (3-digit number on the back of your card): _____

I hereby authorize Rosewood Tucker's Point to collect payment for incidental charges each month and bi annual dues by processing a charge on the credit card listed above.

Cardholder Signature: _____ Date: _____

Please scan and email the forms to Bermuda.membership@rosewoodhotels.com

Please email a photograph for the photo ID Card with the application