



CAYMAN'S ONLY 18-HOLE CHAMPIONSHIP GOLF COURSE

CORPORATE MEMBERSHIP APPLICATION 1 OCTOBER 2025 – 30 SEPTEMBER 2026

Corporate Name: _____

Email: _____

Phone: (Mobile) _____ Work _____

MEMBERSHIP PLAN:

❖ 4 Designees: US \$14,000

❖ Additional Designees: US \$3,500

LIST OF DESIGNEEES:

Designee #1: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

☐ I require a GHIN account

☐ I am a member of CIGA and do not require a GHIN account

☐ I am a member of another club and do not require a GHIN account/club name _____

Designee #2: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

☐ I require a GHIN account

☐ I am a member of CIGA and do not require a GHIN account

☐ I am a member of another club and do not require a GHIN account/club name _____

Designee #3: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

☐ I require a GHIN account

☐ I am a member of CIGA and do not require a GHIN account

☐ I am a member of another club and do not require a GHIN account/club name _____





CAYMAN'S ONLY 18-HOLE CHAMPIONSHIP GOLF COURSE

Designee #4: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

- ☐ I require a GHIN account ☐ I am a member of CIGA and do not require a GHIN account
☐ I am a member of another club and do not require a GHIN account/club name _____

Designee #5: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

- ☐ I require a GHIN account ☐ I am a member of CIGA and do not require a GHIN account
☐ I am a member of another club and do not require a GHIN account/club name _____

Designee #6: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

- ☐ I require a GHIN account ☐ I am a member of CIGA and do not require a GHIN account
☐ I am a member of another club and do not require a GHIN account/club name _____

Designee #7: _____ Phone: _____

Email: _____

HANDICAP INFORMATION:

- ☐ I require a GHIN account ☐ I am a member of CIGA and do not require a GHIN account
☐ I am a member of another club and do not require a GHIN account/club name _____

AUTHORIZATION:

I _____ apply for membership at the North Sound Golf Club. I agree to adhere to all club policies and by-laws.

Applicant Signature

Date