

APPLICATION FORM FOR CHANGE IN COMPANY PARTICIPATING MEMBERSHIP

The Board of Directors
Baguio Country Club Corporation
Country Club Drive
2600 Baguio City

Thank you for your consideration.

Please attach one 2x2 colored picture of the applicant.

Gentlemen:

I hereby apply for **Company Participating Membership** in the Baguio Country Club Corporation. I know that I may be elected to **Company Participating Membership** only by the action of the Board of Directors which has the exclusive right to accept or reject this application.

If accepted, I acknowledge that **Company Participating Membership** shall be vested only upon payment of the required membership entrance fee as the Board may determine and upon approval of my **Company Participating Membership**.

I am aware that membership in the Club is a privilege and not a right and that the Board has the sole and absolute discretion to approve or disapprove my application. I also understand that the Board is not required nor is it under obligation to explain or justify to me or to any party, the reasons for approving or disapproving my application and I undertake not to seek any explanation or justification from the Board or any party, any action/decision made by the Board on my application. I further undertake to hold the Club, its members, officers and directors free and harmless from any claim, liability, suits or similar actions in the event that my application is denied or action thereof is delayed or deferred by the Board.

As a member, I shall abide by the Articles of Incorporation and By Laws, Membership Manual and House Rules of the Baguio Country Club, copies of which are available upon request in Baguio City or the Manila Office at the 7/F, Infinity Tower, Bonifacio Global City or the Club Website.

To support my application, I submit the attached application form completely filled and properly signed by my proposer, seconder and myself.

I hereby undertake to comply with the interview requirement by two (2) directors during the 30 days listing to complete the application process for membership.

Name in Print Signature Date Signed

Company Name:

membership. PERSONAL INFORMATION Family Name: First Name: Maternal Surname: Nickname: Gender: Male Female Citizenship: **BIRTH INFORMATION** Province: City: Country: Date (mo/day/yr): Country Immigrated (if applicable): Year of Immigration: Civil Status: Single Married Legally Separated Widow/Widower **PARENTS** Father: Last Name First Name Maternal Surname Mother: Last Name First Name Maternal Surname SPOUSE'S INFORMATION Last Name: First Name: Maternal Surname: Last Name used Prior to Marriage: Date of Marriage (mo/day/year): **BIRTH INFORMATION** City: Province: Country: Date (mo/day/yr): Country Immigrated (if applicable): Year of Immigration: Sports Interests/Hobbies/Socio Civic Activities: CHILDREN'S INFORMATION Last Name Maternal Surname Civil Status First Name Date of Birth (mo/day/yr) Maternal Surname Date of Birth (mo/day/yr) Last Name First Name Civil Status Last Name Maternal Surname First Name Date of Birth (mo/day/yr) Civil Status Last Name Maternal Surname First Name Date of Birth (mo/day/yr) Civil Status Last Name Maternal Surname First Name Date of Birth (mo/day/yr) Civil Status Note: You may continue on additional sheets if necessary. CAREER RELATED ACTIVITIES 1. Position Name of Company/Organization Nature of Business Tenure of Employment Position Name of Company/Organization Nature of Business Tenure of Employment Note: Use additional sheets, if necessary. Page 2 of 6

Note: Please use block letters, write "N/A" to information not applicable and place a checkmark to applicable box. Further, the Club requires that all applicable fields must be completed in their entirety to be considered for

Position	Name of Business	Natu	re of Business
	EDUCATIONAL ATTAIN	NMENT	
			1
Earned Degree	School	City/Country	Year Graduated
Earned Degree	School	City/Country	Year Graduated
	SUPPLEMENTAL INFORM	IATION	
CIO-CIVIC ACTIVITI	ES		
		<u> </u>	T
Role	Organization	Location	Year
Role	Organization	Location	Year
LITARY RECORD (Ac	tive Duty Only)		
Highest Rank	Military Organization/Branch	Location	Year
ONORARY DEGREES			
Degree Bestowed	Organization	City/Country	Year
Degree Bestowed	Organization	City/Country	Year
OFESSIONAL CERTIF			
VARDS/HONORS/GRA	NTS		
		•	
Award/Honor/Grant	Awarding/Honoring/Granting Body	Location	Year
Award/Honor/Grant	Awarding/Honoring/Granting Body	Location	Year
RRENT PROFESSION	AL AND CLUB MEMBERSHIPS		
			1
Role	Club/Organization	From (year)	To (year)
Role	Club/Organization	From (year)	To (year)
D -1-	Chil Occasion tion	Eng. (2000 p)	To (
Role	Club/Organization	From (year)	To (year)
FILIATIONS (optional)			
igious Denomination:	Political Pa	rty:	
OCATIONS (Please list up	to five (5) hobbies and/or recreational activities.)	
VCUOLOGICAL EITEN	ESS/CAPACITY (Please state details, if a	an of the transfer of 11	noment for D 111
l/or Psychiatric problems. State 1	MONE :::	пу, ој и ештені ина/от сопји	rement jor i sychologu

Bank:		Credit Card	:		Credit Limit	:
Bank:		Credit Card	<u> </u>		Credit Limit	<u> </u>
Bank:		Credit Card			Credit Limit:	
			••		Clean Emile	<u>' </u>
n) Have you ever	had a cancelled cree	dit facility? N	No Yes			
Reason:						
p) Pending civil o	r criminal case/s aga	ainst you in the	Philippines or abr	oad. No	Yes)
Reason:						
e) Past criminal c	onviction in the Phil	ippines or abro	ad. No	Yes		
Reason:						
d) Records of disc	ciplinary action from	n other Clubs.	No Ye	es 🔲		
Reason:						
ADDRESS and (CONTACT NUM	IRFDS				
Residence Address:		IDEKS				
Residence Address.		Stre	et Address			City
	Province	e/Region		Counti	ry	Postal Code
Phone Number/s:		Fax Number/s:		Ema Add	ail Iress:	
Business Address:		• –				
	Com	npany/Organiza	ition		Street	Address
			D : /D :		- C	D + 10 1
Phone	City	Fax	Province/Regio	Ema	Country	Postal Code
Number/s:		Number/s:			lress:	
Preferred Mailing A	ddress: Residence	e Busi	ness			
I believe I will be a	n asset to the Club a	nd hope to con	tribute through the	e following	:	
Partic	eipation in Sports	Competition[
	nittee Memberships		\neg			
Specia	ıl Event Sponsorship) - T				
Others		ſ				
			<u> </u>			
I have applied for E	SCC Membership be	fore. Yes	No	When?		
falsehood or inaccu already granted. I	racy shall be basis	for the rejection he BCC expression	n of my applicati ssly to seek verific	on for mer	nbership as well	ation and that any mate las its revocation or reca ed to my disclosure or n
disclosure above to		e BCC Rules a	nd Regulations an	d all future	e amendments t	hereto which, the BCC n
I undertake to resp	mend.					
					Date	

DATA PRIVACY CONSENT

By providing us with your personal information including without limitation those provided in the membership application, forms such as (registration card, reservation, events, golf, booking forms, live chat, newsletter), member's information sheets, member's data records, emails, social media correspondence through private or public messages, and/or any further updates provided to us by you or provided by you to any of our representatives in an official capacity in relation to your personal data, you hereby give full consent to Baguio Country Club ("BCC") to collect, record, organize, store, update, use, consolidate, block, erase or otherwise process information, whether personal, sensitive or privileged, pertaining to myself and the transactions subject hereof which will be used for the purpose of providing you with relevant product, service, facility, and promotional information, appropriate and/or improved products, facilities & services, or other purposes referred to the BCC Data Protection Manual.

By providing your Personal Information or by buying/availing of our products, facilities and services, you confirm your

	Name in Prin	nt	Signature	Date Signed
	NOM	INATION FORMS	OF CANDIDATE	
Ba ₃ Co	E MEMBERSHIP COMMITTEE guio Country Club Corporation untry Club Road 00 Baguio City			
Gei	ntlemen:			
me	This is to express our des mbership.	ire to nominate		as candidate fo
то	BE COMPLETED BY THE PR	ROPOSER		
1.	How many years have you know	vn the candidate?		
2.	Does your knowledge of the Car	ndidate arise from:		
	Personal Friendship	Professional Relations	Business Rela	ations
3.	If you know of five (5) Club Me	mbers who is known personally Names	Membership Numb	
4.	Please give additional informati would be a fit and financially re		nd the Board of Directors to j	udge whether the candidate
5.			ominee may be known and/o	1

How many years have you known the				
Does your knowledge of the Candidat				
Personal Friendship	Professional Relations		Business Relations	
If you know of five (5) Club Members	who is known personally to the	e candidate	and who may sup	port the application.
	Names	Membe	ership Number	
Please give additional information to would be a fit and financially respons		Board of D	Directors to judge w	hether the candidate
would be a fit and financially lespons.	iole member.			
The profession, business and/or indust	ry where the applicant/nomine	ee may be k	nown and/or expo	sed.
The profession, business and/or indust	ry where the applicant/nomine	ee may be k	nown and/or expo	sed.
The profession, business and/or indust C HEREBY CERTIFY THAT THE M/HER, IN EVERYWAY, A DESIRA	ABOVE APPLICANT IS	KNOWN	TO US AND TH	IAT WE CONSIDE
C HEREBY CERTIFY THAT THE	ABOVE APPLICANT IS	KNOWN	TO US AND TH	IAT WE CONSIDE
E HEREBY CERTIFY THAT THE M/HER, IN EVERYWAY, A DESIRA	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND TH	IAT WE CONSIDE
C HEREBY CERTIFY THAT THE M/HER, IN EVERYWAY, A DESIRA Proposer's Printed Name:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
C HEREBY CERTIFY THAT THE M/HER, IN EVERYWAY, A DESIRA Proposer's Printed Name: Signature:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in Bo	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in BO Date Proposed:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in Bo Date Proposed: Seconder's Printed Name:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in Bo Date Proposed: Seconder's Printed Name: Signature:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in Bo Date Proposed: Seconder's Printed Name: Signature: Membership Number:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE
Proposer's Printed Name: Signature: Membership Number: No. of Years of Membership in Bo Date Proposed: Seconder's Printed Name: Signature:	ABOVE APPLICANT IS BLE MEMBER OF THE BA	KNOWN AGUIO CO	TO US AND THOUNTRY CLUB (IAT WE CONSIDE