



APPLICATION FORM FOR LOCAL RESIDENT MEMBERSHIP

**The Board of Directors
Baguio Country Club Corporation
Country Club Road
2600 Baguio City**

*Please attach one 2x2
colored picture of the
applicant.*

Gentlemen:

I hereby apply for **Local Resident Membership** in the Baguio Country Club Corporation. I know that I may be elected to **Local Resident 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 **Local Resident Membership** shall be vested only upon payment of the required membership entrance fee as the Board may determine and upon approval of my **Local Resident 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.

Thank you for your consideration.

Name in Print

Signature

Date Signed

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 membership.

PERSONAL INFORMATION

Family Name: First Name: Maternal Surname:

Nickname: Gender: Male Female Citizenship:

BIRTH INFORMATION City: Province:

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Maternal Surname	First Name	Date of Birth (mo/day/yr)	Civil Status

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Maternal Surname	First Name	Date of Birth (mo/day/yr)	Civil Status

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Maternal Surname	First Name	Date of Birth (mo/day/yr)	Civil Status

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Maternal Surname	First Name	Date of Birth (mo/day/yr)	Civil Status

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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

<input type="text"/>	<input type="text"/>
Nature of Business	Tenure of Employment

2.
 Position Name of Company/Organization

<input type="text"/>	<input type="text"/>
Nature of Business	Tenure of Employment

Note: Use additional sheets, if necessary.

3. If self employed, please indicate business or profession.

Position	Name of Business	Nature of Business
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EDUCATIONAL ATTAINMENT

1.				
	Earned Degree	School	City/Country	Year Graduated

2.				
	Earned Degree	School	City/Country	Year Graduated

SUPPLEMENTAL INFORMATION

SOCIO-CIVIC ACTIVITIES

1.				
	Role	Organization	Location	Year

2.				
	Role	Organization	Location	Year

MILITARY RECORD (Active Duty Only)

	Highest Rank	Military Organization/Branch	Location Year

HONORARY DEGREES

1.				
	Degree Bestowed	Organization	City/Country	Year

2.				
	Degree Bestowed	Organization	City/Country	Year

PROFESSIONAL CERTIFICATION:

AWARDS/HONORS/GRANTS

1.				
	Award/Honor/Grant	Awarding/Honoring/Granting Body	Location	Year

2.				
	Award/Honor/Grant	Awarding/Honoring/Granting Body	Location	Year

CURRENT PROFESSIONAL AND CLUB MEMBERSHIPS

1.				
	Role	Club/Organization	From (year)	To (year)

2.				
	Role	Club/Organization	From (year)	To (year)

3.				
	Role	Club/Organization	From (year)	To (year)

AFFILIATIONS (optional)

Religious Denomination: Political Party:

AVOCATIONS (Please list up to five (5) hobbies and/or recreational activities.)

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PSYCHOLOGICAL FITNESS/CAPACITY (Please state details, if any, of treatment and/or confinement for Psychological and/or Psychiatric problems. State NONE if inapplicable.)

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BANK AND CREDIT REFERENCES

Bank:		Credit Card:		Credit Limit:	
Bank:		Credit Card:		Credit Limit:	
Bank:		Credit Card:		Credit Limit:	

a) Have you ever had a cancelled credit facility? No Yes

Reason:

b) Pending civil or criminal case/s against you in the Philippines or abroad. No Yes

Reason:

c) Past criminal conviction in the Philippines or abroad. No Yes

Reason:

d) Records of disciplinary action from other Clubs. No Yes

Reason:

ADDRESS and CONTACT NUMBERS

Residence Address:
Street Address City

Province/Region Country Postal Code

Phone Number/s: Fax Number/s: Email Address:

Business Address:
Company/Organization Street Address

City Province/Region Country Postal Code

Phone Number/s: Fax Number/s: Email Address:

Preferred Mailing Address: Residence Business

I believe I will be an asset to the Club and hope to contribute through the following:

Participation in Sports Competition

Committee Memberships

Special Event Sponsorship

Others

I have applied for BCC Membership before. Yes No When?

I certify that all the information given are true and correct of my own knowledge and information and that any material falsehood or inaccuracy shall be basis for the rejection of my application for membership as well as its revocation or recall if already granted. I likewise authorize the BCC expressly to seek verification on any matter related to my disclosure or non-disclosure above to enable it to assess the merits of this application.

I undertake to respect and abide by the BCC Rules and Regulations and all future amendments thereto which, the BCC may from time to time amend.

Signature of the Applicant 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 agreement to the terms and conditions contained in this Privacy Policy. Your rights under this Private Policy will be upheld when invoked by your lawful heirs or assigns.

Name in Print

Signature

Date Signed

NOMINATION FORMS OF CANDIDATE

THE MEMBERSHIP COMMITTEE
Baguio Country Club Corporation
Country Club Road
2600 Baguio City

Gentlemen:

This is to express our desire to nominate _____ as candidate for membership.

TO BE COMPLETED BY THE PROPOSER

1. How many years have you known the candidate? _____

2. Does your knowledge of the Candidate arise from:

Personal Friendship

Professional Relations

Business Relations

3. If you know of five (5) Club Members who is known personally to the candidate and who may support the application.

Names

Membership Number

4. Please give additional information to enable the Committee and the Board of Directors to judge whether the candidate would be a fit and financially responsible member.

5. The profession, business and/or industry where the applicant/nominee may be known and/or exposed.

TO BE COMPLETED BY THE SECONDER

1. How many years have you known the candidate? _____

2. Does your knowledge of the Candidate arise from:

Personal Friendship

Professional Relations

Business Relations

3. If you know of five (5) Club Members who is known personally to the candidate and who may support the application.

Names

Membership Number

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

4. Please give additional information to enable the Committee and the Board of Directors to judge whether the candidate would be a fit and financially responsible member.

5. The profession, business and/or industry where the applicant/nominee may be known and/or exposed.

WE HEREBY CERTIFY THAT THE ABOVE APPLICANT IS KNOWN TO US AND THAT WE CONSIDER HIM/HER, IN EVERYWAY, A DESIRABLE MEMBER OF THE BAGUIO COUNTRY CLUB CORPORATION.

Proposer's Printed Name: _____

Signature: _____

Membership Number: _____

No. of Years of Membership in BCC: _____

Date Proposed: _____

Secunder's Printed Name: _____

Signature: _____

Membership Number: _____

No. of Years of Membership in BCC: _____

Date Proposed: _____