



**THE STANLEY THOMPSON SOCIETY MEMBERSHIP APPLICATION
GOLF CLUB/COMPANY/INDIVIDUAL**

Name, Title _____

Address _____

City _____ Prov/State _____ Postal Code/Zip _____

Daytime Phone (____) _____ Evening Phone (____) _____ Fax (____) _____

Email _____

Category:

- Club
- Corporate
- Friend
- Student
- Yes, please contact me about the Society's newsletter advertising rates.

Thank you for your membership application. This will be processed and confirmation returned to you as quickly as possible. Please make your cheque or money order payable to:

The Stanley Thompson Society
908-505 Consumers Rd.
North York, ON M2J 4V8
Tel: (416) 626-2101 / Fax: (416) 497-9610
e-mail: info@stanleythompson.com

SUPPORT INFORMATION

Club/Corporate Membership *(Please name up to three representatives)*

Club Information *(Please provide the following for our records)*

Our club was founded (month and year): _____

Our course was re-modeled in _____ by _____

We have a restoration plan under way (please highlight) _____

Our architect-of-record is: _____

Receipt of any material you might have about the history of your club would be appreciated.

PLEASE INDICATE ANY ASSISTANCE YOU MIGHT PROVIDE. We are particularly interested in those who could provide assistance, or liaison function, in the Society's quest for valuable information. This might include helping to verify facts, seeking out other interested participants, providing material for the newsletter, and so forth.

I would be interested in helping in the areas indicated:

- Mailing lists
- Research
- Telephoning
- Newsletter material
- Liaison / Media
- Photography
- Interviewing
- Regional history