

# THE CORNELL CLUB

N E W Y O R K

## Cornell Alumni

All Cornell Alumni are eligible for membership at The Cornell Club-New York.  
Alumni include undergraduate and advanced degree holders.

### What Your Membership Includes:

- **Member access to Club amenities including dining, programs, guest rooms, and meeting rooms**
- **Membership to the Health & Fitness Center**
- **Guest access to The Club's reciprocal network**

**Membership dues** are based on the applicant's undergraduate graduation year and current place of employment and residence.  
**Initiation Fee** is 100% of the first year's dues and is a one-time, non-refundable fee, in addition to the first year's dues.

All dues, Club charges and the Initiation Fee are subject to New York Sales Tax.

**Resident:** Employment **OR** residence is within Manhattan.

**Suburban:** Employment **AND** residence is outside of Manhattan. Applicant neither works nor resides in Manhattan.

**Non-Resident:** Both employment **AND** residence are beyond a 50-mile radius of Columbus Circle.

#### Annual Cornell Alumni Membership Dues

Years out of College*	Resident	Suburban	Non-Resident
Less than four	\$322	\$171	\$150
Four-Six	\$486	\$251	\$211
Seven-Nine	\$725	\$377	\$304
Ten-Eleven	\$1,065	\$560	\$438
Twelve or more	\$1,595	\$810	\$647

*\*Years since graduation from undergraduate institution, whether or not it was from Cornell University.*

### How to Join The Club:

Complete all sections of the following one-page application and mail, fax, or email it to the below address/fax. Once processed, the Membership Office will contact you with your membership account number. Please allow about one week for the membership application process.

Please contact the Membership Office with any questions or to submit your application.

**Email:** [membership@cornellclubnyc.com](mailto:membership@cornellclubnyc.com)

**Fax:** 212.986.9543

**Phone:** 212.692.1380

The Cornell Club-New York  
6 East 44th Street  
New York, NY 10017



A Platinum Club of America®

# Cornell Alumni Reinstatement Application

## Applicant Information:

☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Dr.

Previous Membership Number: \_\_\_\_\_

Name: \_\_\_\_\_  
*Last First Middle*

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Cornell ID#: \_\_\_\_\_ Soc.Sec. #: \_\_\_\_\_ (Required)

Undergraduate College/School: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Graduate College/School: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

## Residence & Employment:

Home Address: \_\_\_\_\_  
*No. and Street Address City State Zip Code*

Home/Cell Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Employment Status: ☐ Active ☐ Retired

Business Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Business Address: \_\_\_\_\_  
*No. and Street Address City State Zip Code*

Business Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Please send mail to: ☐ Home ☐ Business

☐ This application is for myself, as described herein.

☐ I wish to have signing privileges for my spouse/domestic partner (\$185, billed annually).

Spouse/Domestic Partner Name: \_\_\_\_\_

In view of my place of residence and employment (see Club definitions of Resident, Suburban and Non-Resident in Member information), I apply for: ☐ Resident ☐ Suburban ☐ Non-Resident membership.

## Billing Information:

I understand that once this application for membership is approved, I will be billed for the initiation fee (a non-refundable deposit) and the quarterly dues for each quarter, unless I state that I would prefer annual billing. The Club operates on a fiscal year (7/1-6/30).

I acknowledge that my Reinstatement Fee will be \$ \_\_\_\_\_ and my Membership Dues will be \$ \_\_\_\_\_/year.

I would like my dues billed: (please check one) ☐ Quarterly ☐ Annually.

Please list a credit card for the billing of the one time initiation fee and membership dues each quarter/year. House charges will be billed monthly and a statement will be mailed to you. House charges may be paid by check or credit card.

**Credit Card Type:** (please circle one) **MasterCard** **VISA** **Diner's Club** **AMEX**

**Card #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **Security Code:** \_\_\_\_\_

• I understand that my membership dues will automatically be charged to the above credit card account for THE CORNELL CLUB-NEW YORK. This automatic charge will remain in effect until I cancel my membership in writing and return my membership card in conformance with the House Rules and Regulations.

• I authorize my credit card to be charged for my membership dues payment by the method indicated above and posted to my account. I understand that my membership dues will be charged to my credit card on the last week of each quarter or fiscal year effective the date of account activation.

• I understand that you may verify the information on this application, including requesting reports from consumer reporting agencies. I hereby make application for membership in The Cornell Club-New York and agree to comply with the by-laws and house rules of the Club and to pay bills when due.

**APPLICANT'S SIGNATURE:**

**DATE:**

## Cancellation Policy: (please read and sign below)

BY SIGNING BELOW, I ACKNOWLEDGE MEMBERSHIP IS CONTINUOUS. SHOULD I WISH TO TERMINATE MY MEMBERSHIP, I UNDERSTAND THAT I AM RESPONSIBLE FOR ALL DUES AND CHARGES THROUGH THE CURRENT QUARTER. I UNDERSTAND THAT ALL RESIGNATIONS MUST BE IN WRITING AND DELIVERED EITHER IN PERSON, OR SENT VIA FAX OR MAIL WITH MY SIGNATURE. SHOULD I WISH TO REJOIN THE CLUB, THERE WILL BE A REINSTATEMENT CHARGE.

**APPLICANT'S SIGNATURE:**

**DATE:**

Primary reason(s) for joining: ☐ Moved / Traveling More to NYC ☐ Convenience ☐ Networking ☐ Social ☐ Club Programs  
☐ Meeting Space ☐ Dining ☐ Guest Rooms ☐ Health & Fitness Center ☐ Affinity ☐ Other: \_\_\_\_\_

Referred by (optional): \_\_\_\_\_ Membership Number: \_\_\_\_\_

How did you hear about The Club? \_\_\_\_\_