

# THE CORNELL CLUB

N E W Y O R K

## Duke University Membership Information

All alumni and full-time faculty and staff of Duke University are eligible for membership at The Cornell Club-New York. Alumni include undergraduate and advanced degree holders.

**Membership dues** are based on the applicant's undergraduate graduation year and current place of employment and residence. In addition to membership dues, first-time applicants are responsible for a one-time, non-refundable initiation fee, and reinstatement applicants are responsible for a reinstatement fee in lieu of the initiation fee.

**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.

**Reinstatement Fee**, where applicable, is 50% of the first year's dues and is a non-refundable fee. For reinstatement applicants, the initiation fee does not apply.

Annual Membership Dues		
Years out of College*	Resident	Suburban
Less than four	\$289	\$147
Four-Six	\$444	\$222
Seven-Nine	\$669	\$341
Ten-Eleven	\$989	\$514
Twelve or more	\$1,490	\$749

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

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

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

All dues, Club charges and the Initiation Fee (or Reinstatement Fee, if applicable) are subject to New York Sales Tax.

### *JOINING IS EASY!*

To join The Cornell Club-New York, please complete all sections of the following one-page application and mail, fax, or scan and email it to us. Once processed, the Membership Office will contact you with your membership account number. (Please allow about one week for the membership application process.)

Please feel free to contact the membership department with any questions. We hope that you decide to join The Cornell Club!

212.986.9543 – fax  
212.692.1380 – phone  
membership@cornellclubnyc.com – email

The Cornell Club-New York  
6 East 44<sup>th</sup> Street  
New York, NY 10017

# Membership Application for Affiliated Universities

## Applicant Information:

Mr.  Mrs.  Miss  Ms.  Dr. Name: \_\_\_\_\_  
Last First Middle  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ 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 (\$165, 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 membership.

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:**

## 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 Initiation 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:** \_\_\_\_\_ **Sec. 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.

**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? \_\_\_\_\_