

THE CORNELL CLUB

N E W Y O R K

Trinity College Dublin Membership Information

All alumni and full-time faculty and staff of Trinity College Dublin 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 Trinity College Dublin.

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 44th 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? _____