

LAKOWE LAKES GOLF FEES 2025

GOLF LESSON FEES

INHOUSE PROS'

Femi Olagbenro (Head Pro) Pro.Mohammed Safiyanu Pro.Bashiru Bakare Pro.Friday Adache

MEMBERS FEES

45 Min	N 40,000.00
18 Holes	N 70,000.00
Tuition Package	N 460,000.00

VISITORS LESSON FEES

45 Min	N 60,000.00
18 Holes	N 120,000.00
Tuition Package	N 700,000.00

JUNIOR LESSON FEE

45 Min	N 30,000.00	
Tuition Package	N 300, 000.00	

CORPORATE GOLF CLINIC

15-30 Persons	N 650,000.00
31-50 Persons	N 900,000.00

MEMBERSHIP FEES

MEMBERSHIP TYPE	ENTRY FEE	
INDIVIDUAL	N 7,000,000.00	Per Person
RESIDENT INDIVIDUAL	N 3,500,000.00	Per Person
FAMILY	N 10,000,000.00	Per Family
RESIDENT FAMILY	N 5,000,000.00	Per Family
CORPORATE A	N 15,000,000.00	For 2 Persons

MEMBERSHIP TYPE	2025 ANNUAL SUBSCRIPTION
CORPORATE A - Named	N 3,000,000.00
CORPORATE B – Floating	N 18,000,000.00
TEMPORARY MEMBERSHIP (6 MONTHS)	N 3,000,000.00
COUNTRY MEMBERSHIP (20 weekend rounds and unlimited weekday)	N 4,000,000.00
WEEKDAY MEMBERSHIP	N 3,200,000.00
INDIVIDUAL	N 2,200,000.00
RESIDENT INDIVIDUAL	N 1,850,000.00
FAMILY	N 3,800,000.00
RESIDENT FAMILY	N 2,700,000.00
JUNIOR	N 3,000,000.00

- 1. Family Membership Is limited to the principal member, spouse and dependant up to the age of 23 years, provided the dependant is studying at a recognized study institution. Annual subscription covers a minimum of 2 golfers.
- 2. Corporate A (Named cards) A minimum of 2 named players per corporate membership. No playing restriction. Guest of corporate members are restricted to the same person 10 times a year. The membership is transferable once annually with a transfer fee of 250,000 per transfer.
- 3. Corporate B (Floating cards) A maximum of 4 players allowed (including guests) from 7:00am 12:00pm and 4 players from 12:00pm till close of play per corporate membership. The company provides the names of executives that are covered by the floating cards. This card also covers corporate guests.
- 4. Country Membership is entitled to 20 weekend/public holiday rounds and 20 weekday rounds.
- 5. Range & Mashie Course Membership Unlimited use of the range facilities.
- **6. Member's Guests** Member's guests can only play 3 times per year in the morning, subsequent rounds will be in the afternoon.

PLAYING FEES

NON-MEMBER FEE (Weekday) - N 80,000 Per Person (Shared Cart)
NON-MEMBER FEE (Weekend) - N 120,000 Per Person (Shared Cart)
MEMBER'S GUEST FEE (Weekday) - N 60,000 Per Person (Shared Cart)
MEMBER'S GUEST FEE (Weekend) - N 100,000 Per Person (Shared Cart)
TWILIGHT (Weekends) - N 70,000 Per Person After 3:00pm (Shared Cart)

ADDITIONAL CART - N 20,000 JUNIOR GREEN FEE (Weekday) - N 50,000 Per Person (Shared Cart) JUNIOR GREEN FEE (Weekend) - N 70,000 Per Person (Shared Cart) GOLF RANGE FEE - N 40,000.00

PLEASE NOTE:

ACCOUNT DETAILS

BANK NAME: GTB

ACCOUNT NAME: LAKOWE LAKES OPERATION

ACCOUNT NO: 0118104905

MEMBERSHIP REQUIREMENT

INDIVIDUAL & FAMILY

- 1. Completed Application Form
- 2. Copy of Identification (Passport or License). Please note that expatriate must provide copy of the passport
- 2 passport photographs (Family memberships must include names of each family member behind photos)
- 4. Receipt of payment (Transfer must be referenced with bank details and reference numbers)

	Affix recent passpord photo here	

MEMBERSHIP REGISTRATION FORM

INDIVIDUAL & FAMILY MEMBERSHIP

PLEASE TICK AS APP	ROPRIATE:			
Individual Subscription Clo Do you currently own Prop		tate?	Single Yes	Family No
C O R	PORATE	INFOF	RMATION	
NAME				
Surname		First Name		
RESIDENTIAL ADDRESS				
House No.		Street		
Town/City	State _		Country	
Nationality	Occupation _		Mobile Phone	
Identity No. or Passport No, if I	Nigerian Resident		Home Phone	
Passport No, if foreign residen	t		_	
POSTAL ADDRESS				
EMAIL				
SEX: Male	Female	MARITAL STA	ATUS: Single	Married

FAMILY MEMBERSHIP OPTION

Kindly include names of all family members on membership plan.

Family membership is limited to the Principal member, spouse plus a maximum of four dependants up to the age of 23 years, provided the dependants are studying at a recognized study institution. The Club reserves the right to request that such dependants provide proof of study in form of a student's identity card from a recognized institution.

Spouse				
Dependant 1				
Dependant 2				
Dependant 3				
Dependant 4				
	PAYMEN	NT DETAI	LS	
PLEASE TICK AS AF	PPROPRIATE:			
Method of Payment:	Electronic Tran	nsfer Cheque	Debit/Credit Card	
CHEQUE DETAILS				
Bank Name		Cheque No.		
DEBIT / CREDIT CARD I	DETAILS			
Card Name	Card Number		Verification No	
Expiry Date: dd		mm	уууу	
Card Type:	Master Co	ard Visa Card		
I/We declare that the information submitted on this application is true and correct. Upon acceptance of membership, I/We shall be bound by the Club Constitution and Rules, Regulations and By-laws of the Club. A copy of the Constitution will be made available to members on the website or at the Club premises. I/We confirm that a Membership Agreement has been duly executed by me/us and I/We shall comply with the terms and conditions stated therein.				
SIGNATURE				
	dd	mm	уууу	
	MEMBERS	SHIP OFF	ICE	
CLUB REPRESENTATIV	E			
Name		Job Title		
SIGNATURE				
O.OHA I ORE				
	dd	mm	VVVV	

VIEW MORE

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