

THE CORNELL CLUB

NEW YORK

Congratulations TO THE GRADUATES!

Q: Can I sign the application on behalf of the graduate?

A: Yes! Please note three signature areas.

Q: What address should I include if the applicant is still looking for housing after graduation?

A: We suggest using the parent/guardian home address and graduates can update their account once they have confirmed a new address.

Q: Is it ok if I don't have the student's ID (for Cornell applications only)

A: Yes! We can look that up for you.

Q: How can I submit an application?

A: There are a few ways to submit an application.

- By email to membership@cornellclubnyc.com
- By fax to 212.986.9543
- By mail (The Cornell Club-New York | 6 East 44th Street New York, NY 10017)
- Drop off an application at The Club

Q: Can this be a surprise?

A: Yes. We will not add new member email addresses to the Member's account until after graduation.

Q: Will my graduate receive a membership card?

A: We send new member welcome letters and membership cards to the address provided on the application.

Q: Can I share membership information with friends and family with graduates from other schools?

A: Absolutely! Our members hail from Cornell, Brown, Colgate, Duke, Notre Dame, St. Lawrence University, Trinity College Dublin, Stanford, Tulane, and Wake Forest. Don't see their school listed? Graduates can join as Business Associates!

Membership is continuous. On June 30, 2026, dues are converted to the applicable membership category. (approximate dues) Resident: \$400

We look forward to receiving your graduate's application. Please allow one week for the application to be processed.

HERE'S ALL
YOU'LL NEED
TO GIVE THE
GIFT OF
MEMBERSHIP!

01

Top FAQ's Answered
Here!!

02

A PDF Application

03

A Gift Certificate for
Your Graduate

Graduating Senior Membership Application - Business Associate

Please submit your application to Membership@cornellclubnyc.com.

Applicant Information:

Mr. Ms. Name: _____
Last *First* *Middle*

Date of Birth: ____ / ____ / ____

Undergraduate College/School: _____ Graduation Year: _____

Residence & Employment:

Home Address: _____
No. and Street Address (including Apt. #) *City* *State* *Zip Code*

Home/Cell Phone Number: _____ E-Mail: _____

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 address

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 \$250 for my membership. The Club operates on a fiscal year (July 1-June 30) and my payment covers me through the end of the fiscal year. Upon the start of the next fiscal year my Membership will automatically be converted to a category based on my undergraduate graduation year, and home and business address.

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.

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: _____

THE CORNELL CLUB
NEW YORK

*You Have Received the
Gift of Membership to
The Cornell Club - New York*

Full Access to The Club's Amenities
Membership to The Club's Health & Fitness Center
Guest Access to Private City and Country Clubs
www.cornellclubnyc.com

To: _____

From: _____

The Cornell Club-New York | 6 East 44th Street | NYC | www.cornellclubnyc.com



A Platinum Club of America®

