



Membership Plan Payment Authorization Form

Membership terms are for one year (12 months). Member agrees to monthly charges from January through December or the period of 12 months. All Members are required to keep a debit/credit card or checking account information on file for monthly dues & club/golf package payments.

A Club Membership is required in order to purchase a Golf Membership
5% Discount Applies to All Owner Member Club & Golf Packages paid in full by 1/15/2023 (cash/check)
4% Service Fee will be Applied to All Credit/Debit Card Transactions for Membership Plans

SECTION I: Member Information

Member Name(s): _____

Billing Address: _____

Phone Number: _____ Member Email: _____

SECTION II: Payment Information & Authorization

This payment is for the following: _____

- 60 Day Free Social Family Membership Start: _____ End: _____

PAYMENT INFORMATION (Check One)

- CREDIT/DEBIT CARD

Card Type: Mastercard | VISA | Discover | AMEX | Other _____

Card Number (#): _____

Expiration: _____ (mm/yy) CVV: _____ Zip Code: _____

- BANK (ACH)

Card Type: Checking | Savings

Name on Acct: _____ Bank Name: _____

Routing #: _____ Account #: _____

CUSTOMER SIGNATURE: _____ Date: _____

Printed Name: _____