SHADOW VALLEY COUNTRY CLUB (SVCC)

METHOD OF PAYMENT FORM

METHOD OF PAYMENT POLICIES

In order to provide members with high quality programs and services as cost effectively as possible, SVCC will not accept cash or checks. Upon execution of the application for membership or on request, members will provide SVCC with a MasterCard, Visa, American Express or Discover credit or debit card number, expiration date, the cardholder name and signature to be used for monthly dues.

Household Name: _____ Household Phone: (_____) _____ - _____

MONTHLY DUES PROCEDURES

All monthly dues will be charged by SVCC on the first of each month to the account designated by the member. The current monthly dues excluding taxes are: Social - $85, Tennis - $145 and Golf - $275. In the event that monthly dues are not funded by the account designated by the member, the member will be contacted by SVCC for immediate resolution. A member's failure to fund the monthly dues will result in immediate suspension of membership benefits and privilages.

Please indicate the credit or debit card you wish to use for your monthly membership dues. SVCC will charge your credit or debit card on the first day of each month.

☐ I authorize Shadow Valley Country Club to use the following credit or debit card for monthly dues:

☐ MASTERCARD ☐ VISA ☐ AMERICAN EXPRESS ☐ DISCOVER

_____
Cardholder's Name

_____
Signature Date

Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Exp. Date ☐☐-☐☐

PURCHASES PROCEDURES

All purchases (i.e. beverage, food, cart fees, merchandise, indoor tennis court time, etc.) will be paid by the member or their guest with a credit or debit card at the time of the transaction. It is preferred that credit or debit cards be used at the time of the purchase, but if you wish, we will maintain your credit or debit card information in your membership profile.

☐ I prefer to use the card of my choice at the time of purchase.
☐ I prefer to use the same card for purchases that I use for monthly dues.
☐ I authorize Shadow Valley Country Club to use the following credit or debit card for purchases:

☐ MASTERCARD ☐ VISA ☐ AMERICAN EXPRESS ☐ DISCOVER

_____
Cardholder's Name

_____
Signature Date

Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Exp. Date ☐☐-☐☐

FOR OFFICE USE ONLY

Application on File _____ Date Submitted ____/____/____ Date Processed ____/____/____
Member Number _____ Recieved By _____ Processed By _____