



PO Box 55 . 1810 Valleybrook Dr . Kingsville, MD 21087
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BUDGET PAYMENT PLAN ENROLLMENT FORM - 2019

- **Available only with Full Membership Plan A**
- **Pre-authorized VISA, Mastercard, AMEX & Discover payments ONLY**
- **NO checks, money orders, debits**
- **Must complete member application and sign Membership Contract**

| | | | |
|---------------|-----------------------|------------------------|-------|
| Last Name | First Name | Spouse (if applicable) | |
| Address | City | Zip | Phone |
| Email Address | Spouses Email Address | | |

PLEASE READ CAREFULLY AND SIGN BELOW:

Application for membership is hereby made to Valleybrook Country Club, LLC (“the club”). I/we agree to abide by any/all rules and regulations of the club as well as the Membership Contract of the club. I/we are familiar with and recognize the risk of injury to persons and/or property which may result from use of the club facilities. With full knowledge and understanding of such risk, I/we agree to use the club facilities at my/our own risk. I/we agree to release the club and property owners from all liability from my, or my guests’ participation in any sport, exercise or activity of the club.

Print: _____ Sign: _____ Date: _____

In full understanding that there are NO REFUNDS and membership privileges will be suspended if the payment plan is not completed on schedule, please sign me up for the budget payment plan. The scheduled payments will be charged to the authorized credit card on the dates below. I agree to pay a \$15 service fee for any credit card declines.

Credit Card # _____ - _____ - _____ 3 digit # _____ Exp. Date _____

Name exactly as it appears on credit card (please print) _____

Applicant’s signature _____ Date _____

| PAYMENT PLAN | Total Cost | Charge April 1 | | Charge May 1 | | Charge June 1 | |
|--------------|------------|----------------|-------|--------------|-------|---------------|-------|
| Individual | \$690 | Individual | \$230 | Individual | \$230 | Individual | \$230 |
| 2 Person | \$960 | 2 Person | \$320 | 2 Person | \$320 | 2 Person | \$320 |
| Family | \$1110 | Family | \$370 | Family | \$370 | Family | \$370 |

CREDIT CARD PROCESSING FEE OF APPROXIMATELY 3% APPLIED TO ALL CHARGES
 Please mail, fax, or email the Budget Payment Enrollment Form to the address at the top of the form.