



PO Box 55 . 1810 Valleybrook Dr . Kingsville, MD 21087  
 Phone: 410-803-2334 Fax: 410-803-8985  
 info@ValleybrookCC.net

## 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	\$1140	Family	\$380	Family	\$380	Family	\$380

***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.***