

PLAYER INFORMATION:

Name: _____

e-mail address: _____

Address: _____

Additional player name(s): _____

Telephone No. _____

Annual Fee Amount:	\$ _____
Dependent(s):	\$ _____
Initiation Fee Amount:	\$ _____
TOTAL AMOUNT DUE:	\$ _____

Payment Plans:

Annual payment: One full payment is due at time of registration.

Please remit to: Windsor Golf Club, Inc. 1320 19TH Hole Drive, Windsor, CA. 95492

Monthly Debit: First week of each month, pre-authorized amount deducted from account.
 Include voided check from account to be debited
 Please sign authorization form
 Include check for month of January with returned form
 (Automatic deductions begin with February payment)
Not needed if voided check is on file
Early cancellation will result in a fee amount equal to one month payment.

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEDUCTIONS:

I(We) hereby authorize Poppy Bank to initiate debit entries to my(our) account on the attached VOIDED check, and the depository named on the attached voided check, herein called Depository, to debit the same to such account.
 This authorization is to remain valid and in effect from January 1-December 31, 2024 at which time contract can be renewed or cancelled.
 Please note: This authorization includes service charges incurred resulting from non-sufficient funds in the amount of \$40 per occurrence.

AMOUNT: \$ _____

FREQUENCY: Monthly

Name: _____

Telephone No. _____

Signature: _____

Date: _____