

CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

I (we) authorize HF Golf, LLC/Fox Ridge GC to	electronically debit my (our) accoun	t (and, if necessary,
electronically credit my (our) account to correct e	roneous debits) as follows:	
[†] Checking Account / [†] Savings Account (select ("DEPOSITORY"). I (we) agree that ACH transaction	,	
Depository Name		
Routing Number Account Nur	nber	
Amount of Membership Dues Paid:	Check #:Visa I	MC Discover AMEX
Amount of Membership Dues Charged Monthly:		
Date(s) and/or frequency of debit(s):The 15 th	of every month in 2017	
I (we) understand that this authorization will rel LLC/Fox Ridge GC in writing, that I (we) wish to LLC/Fox Ridge GC requires at least 60 prior understood that upon cancellation of ACH Autho immediately.	revoke this authorization. I (we) under notice in order to cancel this auth	erstand that HF Golf, horization. It is also
Name(s)		
(Please Print)		
Date Signature(s)		

A \$35 Fee Will Be Charged for All Returned or Cancelled ACH Payments

2017 Season



Mail completed forms to:

HF Golf, LLC
Attn: Jenn Manning

304 Gorham Road Scarborough, ME 04074