



1013 New Camp Creek Church Rd. Kings Mtn, NC 28086 clubwoodbridge@gmail.coom

CLUB WOODBRIDGE AUTOMATIC BANK DRAFT AGREEMENT

☐ FAMILY MEMBERSHIP 12 monthly payments of \$41.95
☐ SENIOR FAMILY MEMBERSHIP 12 monthly payments of \$37.95
☐ SINGLE MEMBERSHIP 12 monthly payments of \$21.95
☐ SINGLE SENIOR MEMBERSHIP 12 monthly payments of \$19.95

Membership ID:	Monthly Payment Amount:	
Name on Account (Please Print):		
Address:	·	
City:	State:	
Zip:		
Please transfer payments directly from my:	☐ Checking Account (Attach a voided check)	
	☐ Savings Account (Attach a savings deposit slip)	
	☐ Credit/Debit Card (attach a copy of card)	
Preferred payment date:	nonth $\Box 15^{\text{th}}$ of every month	
I give reasonable notification to terminate this authorization on my renewal date of membership. I understand that there will be a \$25.00 fee automatically charged to my account for any insufficient funds (NSF) transactions. I have attached a voided check; savings deposit slip or credit card. Authorized signature on my account:		
Sign:	Date:	
Please attach a voided check, savings	s deposit slip or a copy of Credit/Debit Card	