

PDP Membership

Player Development Program

- \$39.95 Per Month
- Unlimited Practice Facility Usage
- Play 7 Days a Week
- \$20 Play Monday-Friday Anytime
- \$30 Saturday & Sunday Before 12

Name: _____

E-Mail: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Billing Information

Card Number: _____

Expiration Date: _____ CVV: _____

Cardholders Signature: _____

By signing above, I hereby allow Atascocita Golf Club to bill the aforementioned card on a monthly basis for membership purposes. I understand that I may cancel my membership with a minimum 30 day advance notice. Failure to give the required notice may result in fees to the aforementioned card. I fully understand and accept the fees associated with my account.

If you have any questions contact our Business office:

accounting@atascocitagolfclub.com

(281)-812-6243 EXT -2

