(573) 796.2089



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Membership Invoice Form for FY2024

April 1, 2023 to March 31, 2024

Name		Spouse		
Mobile Phone		Mobile Phone		
Email Address		Email Address		
Mailing Address				
Home Phone		Preferred Communication Method (e-mail, phone, mail)		
Please make membership selection be	elow:			
	One Time Payment	or	Monthly AC	H Option
Family Membership Dues	1,275.00			111.56
Individual Membership Dues	1,000.00			87.50
Social Membership Dues	675.00			59.06
Junior Membership Dues	400.00		<u></u>	
Electric Cart Shec	125.00			10.42
Gas Cart Shec	100.00			8.35
Missouri Golf Assoc Membership	30.00	_		2.50
Total Amount Due:		or Total	Monthly ACH:	
Dues are deliquent as of May 1, 202	23. \$15.00 a month will b	e charged for dues	not received by J	une 1, 2023.
PLEASE RETURN THIS FORM WITH Y	OUR PAYMENT.			
ACH AUTHORIZATION FOR MONTHLY	OPTION ONLY:			
I hereby authorize the California Coun	try Club to initiate debit er	tries from my check	ing account named	below on the
fifteenth day of every month beginning	ng April 15, 2023 (or alterna	ite month listed her	e). I agree to make
the annual dues payment, split over 1	2 months, (or a shorter ter	m as long as total an	nount due is paid in	full). This
authorization is to remain in effect un	·=			
its termination in such time and in such				
understand that my membership will	= =			=
Treasurer in writing that I do not wish		-	at the beginning of	the new fiscal year,
I understand that my monthly payme	ent amount will automatic	ally increase.		
Authorized Signature:				
		21		
Date:		Please include a voided check for ACH verification.		
Routing Transit/ABA Number:				
Routing Transit/ABA Number:		Return form no late	er than the 10th of t	the month when