

# The Crossings at Montevideo

P.O. Box 217  
Montevideo MN 56265  
320-269-6828

## 2019 Automatic Debit Agreement

I understand that I am purchasing a 2019 membership that is being paid for over 10-month calendar that begins February 15, 2019 continuing through November 15, 2019.

Further, I understand that a single payment is due up front for the number of months due before the automatic debit will begin. Example, if auto debit begins April, then February and March dues must be paid up front. Agreement must be completed by the 10<sup>th</sup> of the month to be processed for that month.

### Authorizations for Automatic Payment

**(Please Attach Void Check)**

I (We) authorize The Crossings at Montevideo, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called the FINACIAL INSTIUTION, to debit the same such account for the above fees. I (We) acknowledge that the origination for ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Financial Institutions Name \_\_\_\_\_

Account to be debited (please check one): Checking Account \_\_\_\_\_ **OR** Savings Account \_\_\_\_\_

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

Print Name or Names on Account: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### **Type of Corporate Membership: MUST BE SET UP BY MARCH 10, 2019 to receive discount**

_____ \$ 975.00 Family	_____ \$188.00 College Membership
_____ \$ 578.00 Young Adult Family	_____ \$600.00 Seasonal Family Cart Lease
_____ \$ 450.00 Young Adult Single	_____ \$450.00 Seasonal Single Cart Lease
_____ \$ 923.00 Couple Membership	_____ \$169.00 Single Range Pass
_____ \$ 672.00 Single	_____ \$199.00 Family Range Pass

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Total Amount of Dues – \_\_\_\_\_ Amount of Single Up Front Payment

Amount of Monthly Automatic Debit \$ \_\_\_\_\_  
(Please remember \$3.00 will be applied each month for transaction fee.)

#### **Note:**

- \$3.00 Monthly Transaction fee will be applied for each withdraw.
- Automatic debit withdrawals will be made on the 15<sup>th</sup> of each month.
- All written debit authorization must provide that the Receiver may revoke the authorization only by notifying the originator in the manner specified by the Receiver.
- Single entry reversals do not require authorization by the Receiver.
- The underlined language in the authorization above represents the disclosure agreement requirement associated with the classifications of OFAC economic sanction policies upon ACH Network participants.
- All NSF transactions are subject to a \$30.00 service charge.