

# Four Seasons Summer Membership

## 2024 Summer Membership - Session runs May 1st through Labor Day

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

DOB Month \_\_\_\_\_

### Select Membership Option:

Individual Adult Full Rate: \$1,504

Individual Adult Auto Pay: \$395

Additional Adult\* Full Rate: \$1,429

Additional Adult\* Auto Pay: \$375

Junior (18&Under w/adult) Full Rate: \$340

Junior (18&Under w/ adult) Auto Pay: \$89

**PAYMENT** - I understand that I am responsible for the full term of the membership and that memberships are not refundable or assignable.

*Cardholder acknowledges receipt of goods and/or services in the amount of the total shown herein and agrees to perform the obligations set forth in the cardholder's agreement with the issuer. If your payment fails to clear bank processing, a \$25 overdraft charge will be added to your account.*

I authorize FSRC to automatically charge my credit card in the monthly amounts of \$\_\_\_\_\_ over \_\_\_\_\_ months (after an initial payment made at time of registration) for a total of (membership rate + 5% processing fee) \$\_\_\_\_\_.

Credit Card Number: \_\_\_\_\_

Expiration: (mm/yy) \_\_\_\_\_ Code: \_\_\_\_\_

Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

*\* In the same family and at the same address.*

