



Charging Privileges Approval Form

For Office Use Only

Member # _____

Authorized by: _____

Please Remember
*Applications for charging privileges must be
completed prior to first charge.*

RR#2, Port Elgin, ON, N0H 2C6
Phone: (519)389-4031
Fax: (519)389-5530
Website: www.saugeengolf.com

Name(s): _____

Address: _____

Town/City: _____ Postal Code: _____

Phone: (Home) _____ (Work) _____

Email Address: _____

Visa #: _____ (Expiry) _____

Master Card #: _____ (Expiry) _____

- All accounts must be secured with a credit card number and expiry date.
- Club account charges will be processed by the 15th of the following month
- A \$2.00 monthly service charge will be added to your account
- Please sign your charges and ensure your name and member number is legible.
- Unless otherwise requested, statements will be provided via email only.
- Requests for copies of invoices will be assessed a service charge of \$10.00, so please keep your receipts.
- Your charge privileges can be used in our dinning room, lounge, patio, banquet facility, beverage cart or pro shop. Certain limitations may apply to banquet use.
- This system is a privilege, and management has the right to terminate this at any time.

I have read and understand the above terms and agree to honour the charges as outlined above. I fully agree that my number be applied to Visa or Master Card invoices by the signing of the club for said payment of my account.

Date: _____ Signature: _____