

2022 MEMBERSHIP
Scotch Pines Golf Course – Payette, ID
Membership Registration

<u>CHECK BOX</u>	<u>PASS TYPE</u>	<u>PRICE</u>	<u>TAX</u>	<u>TOTAL</u>
<input type="checkbox"/>	NEW - SINGLE * Within a 5 yr period	\$ 706.00	\$44.00	\$ 750.00
<input type="checkbox"/>	SINGLE	\$ 802.00	\$48.00	\$ 850.00
<input type="checkbox"/>	NEW-COMBO * Within a 5 yr period	\$ 1155.00	\$70.00	\$1225.00
<input type="checkbox"/>	COMBO	\$ 1320.00	\$80.00	\$1400.00
<input type="checkbox"/>	JUNIOR *18 & Under	\$ 100.00	\$ 6.00	\$ 106.00
<input type="checkbox"/>	COLLEGE * 12 Credit minimum	\$ 300.00	\$18.00	\$ 318.00
<input type="checkbox"/>	CART SHED RENTAL Jan - Dec * Sign Agreement on back	SHED # _____	N/A	\$ 500.00
<input type="checkbox"/>	TRAIL USEAGE FEE Jan - Dec	\$ 225.00	N/A	\$ 225.00
<input type="checkbox"/>	ANNUAL CART RENT FEE * Use of a Scotch Pines golf cart	\$ 520.00	\$30.00	\$ 550.00
	COMBO – w/ Membership	\$ 100.00	\$ 6.00	\$ 106.00
	SINGLE – w/ Membership	\$ 75.00	\$ 4.50	\$ 79.50
	(Range Pass Prices represent when bought At Time of membership purchase)			
	REGULAR COMBO PASS	\$ 150.00	\$ 9.00	\$ 159.00
	REGULAR SINGLE PASS	\$ 125.00	\$ 7.50	\$ 132.50

**RANGE
PASSES**

PAYMENT of FEES **TOTAL DUE** =====

Scotch Pines Golf Course
10610 Scotch Pines Rd ~ Payette ID 83661
(208) 642-1829
Scotchpinesgolf.com

Member Information

Name/s: _____

Address: _____ City: _____ Zip: _____

Contact Number: _____ Home Cell Work

Email: _____

Children Under 18 yrs: Name _____

Name _____

Cart Shed Lease Agreement

By signing this lease agreement for a cart shed, I acknowledge that PMDC is not responsible for any damage or loss to my cart or personal property. I acknowledge that PMDC does not carry insurance to any loss I may incur and that I assume all risks for bodily injury that may occur on PMDC property. If I am responsible for any damage to the cart shed, I am responsible for the cost of the repairs.

SHED #: _____

Signature: _____

Date: _____

2021 Membership Account Payable Extended Payment Plan

An active Credit Card is required for the Extended Payment Plan. The Extended Payment Plan will include 5 payments, with a 20% minimum payment at time of purchase as a first payment. All remaining payments will include a \$10 payment plan fee. All remaining balance will be Due in Full by August 15, 2021. *(NO New Payment Plan will be available until ALL Outstanding balances are paid.)*

Total Charged: _____

Required First Payment (20%): _____ **Date Paid:** _____

DUE DATE	PAYMENT OWED	EPP CHARGE	TOTAL PAID	DATE PAID
Feb. 15, 2021		\$10.00		
Apr. 15, 2021		\$10.00		
May 15, 2021		\$10.00		
June 15, 2021		\$10.00		
July 15, 2021		\$10.00		
August 15, 2021		\$10.00		

I understand that my signature constitutes a contract with Scotch Pines G.C. I agree to pay according to the schedule above. I authorize you to charge my credit card on the scheduled due dates.

Visa/MC/Amex/Disc

CC# _____ Expires: _____

Sec Code: _____

Signature: _____