

The Trails of Frisco Golf Club



Players Membership Contract

- ❖ Unlimited use of the practice facilities 7 days a week
- ❖ **Free Golf** at the times listed below
- ❖ 25% off Food and Beverage including alcohol
- ❖ 10% off Pro Shop Merchandise
- ❖ Accompanied Guest Rate \$35 per person at the times listed below (*Up to 3 Guests*)
- ❖ 14 Day advanced booking

March (2nd Sunday) – November (1st Sunday)

Day	Time	Rate
Monday - Thursday	ALL DAY	FREE
Friday - Sunday	2:00PM – 3:50PM	\$30.00 + Tax
	After 4pm	FREE

November (after 1st Sunday) – March (before 2nd Sunday)

Day	Time	Rate
Monday - Thursday	ALL DAY	FREE
Friday - Sunday	1:00PM – 2:50PM	\$30.00 + Tax
	After 3pm	FREE

** Excludes holidays, cart fee included with round **

The Membership Program is available for the Player and the Player's immediate family members listed below. Upon execution of the Agreement the payment of the Fee indicated below, the Player and the specifically named family members shall receive all Program benefits and privileges. It is understood that this is intended to be a month-to-month program and either party can terminate the Agreement with 30 days written notice. The written notice form is available in the Pro Shop.

3 Month Minimum Commitment Required.

PLANS OFFERED – please select one and provide full name(s):

_____ **Individual Member:** \$250.00 (plus tax) per month

_____ **Family Fun Members:** \$295.00 (plus tax) per month

**Family to include spouse/partner living in the household and children ages 17 and under.*

Partner/Spouse _____

Child (17 & Under) _____

Child (17 & Under) _____

PAYMENT

Monthly Installment Plan: I wish to pay for my Plan in monthly installments. The charge will be automatically made on the 1st day of the month for that month. The Trails of Frisco Golf Club is hereby authorized to make the recurring monthly charge to my credit card until I give 30 days written notice.

Name: _____

Card Number: _____ Exp. Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Contact Phone #: _____ Email Address: _____

By signing below, the member agrees to all the guidelines above as well as charges made through the card on file when prompted:

Member Signature: _____ Date: _____

Trails of Frisco Golf Club Staff: _____