

# 2021 EZ-Pay Application

## **EZ-Pay Retail Installment Agreement and Credit Card Authorization Form**

Notice To The Buyer: Do not sign this agreement before you read it or if it contains blank spaces.  
You are entitled to a copy of the agreement you sign.

Principal amount: \$\_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

FOR VALUE RECEIVED, I, \_\_\_\_\_ (Passholder) promise to pay Garrisons Lake Golf Club (Club) the sum of \_\_\_\_\_ dollars (\$ \_\_\_\_\_), on the unpaid balance as specified here. Repayment shall be made in \_\_\_ remaining monthly installments, consisting of \$ \_\_\_\_\_ per installment on the 25th day of each month beginning on \_\_\_ / \_\_\_ / \_\_\_ and continuing through for \_\_\_ months until the principal is paid in full, ending with a final payment on \_\_\_ / \_\_\_ / \_\_\_.

The credit card referenced on this document provided by the Passholder will be charged as noted above. If the Passholder fails to make an installment payment when due or fails to comply with any other term of this promissory note, the loan will be considered in default. A late penalty charge of \$10 dollars (\$10.00) per day will be assessed until the account is brought current inclusive of the late charges and applicable fees. This note may be prepaid by the Passholder at any time in whole or in part without premium or penalty. In the event of the Passholder's death, the unpaid indebtedness remaining on the note shall be canceled.

The Passholder must promptly inform the Club of any change in name, address, or credit card status. If the Club prevails in a lawsuit to collect on this note, the Passholder will pay the Club's court costs, collection agency costs, and attorney's fees in an amount the court finds to be reasonable.

I acknowledge that a copy of the signed agreement has been received this \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Passholder's Signature

\_\_\_\_\_  
Clubs Representative's Signature

Passholder's Authorized Credit Card Type: \_\_\_\_\_ Number \_\_\_\_\_

Name On Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Passholder's Permanent Address: \_\_\_\_\_  
\_\_\_\_\_