

CLUB FETCH SPLASH MEMBERSHIP RENEWAL

I agree to the CRCG Club Fetch Membership Rules and Regulations.

Name: (Printed) _____

Name: (Signature) _____

Date: _____

CRCG Approval: _____

Date: _____

Club F.E.T.C.H. Registration Renewal Form

Date: _____

Name: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ ZIP: _____

Dog #1: Name: _____ Age: _____ Breed: _____

Dog #2: Name: _____ Age: _____ Breed: _____

Dog #3: Name: _____ Age: _____ Breed: _____

Dog #4: Name: _____ Age: _____ Breed: _____

Membership Options:

		Qty	Total
<input type="checkbox"/> 6 month recreational swim	\$50/month	1	_____
<input type="checkbox"/> 12 month recreational swim	\$45/month	1	_____
<input type="checkbox"/> Additional Dogs 2+	\$25/month	_____	_____
<input type="checkbox"/> 6 month reserved swim	\$30/month	1	_____
<input type="checkbox"/> 12 month reserved swim	\$25/month	1	_____
<input type="checkbox"/> Additional Dogs 2+	\$20/month	_____	_____
Total Monthly Charge:			_____

(Monthly auto-payment charges will continue with the below information.)

Credit Card Payment Information:

Name on Card: _____

Credit Card #: _____ Expiration: _____

Security Code: _____ ZIP Code: _____

ACH Payment Information: (or provide copy of cancelled check)

Name on account: _____

Bank Name: _____

Bank Account #: _____

Account Routing #: _____

Monthly Charge Authorization Signature:

Printed: _____ Signature: _____

Date: _____