



2017

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
e-Mail \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_  
Alternate Phone Number \_\_\_\_\_

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**Automatic Credit Card Charge  
Golf Course Payments**

Monthly Amount Charged to Credit Card \_\_\_\_\_

Credit Card Name \_\_\_\_\_  
Credit Card Number \_\_\_\_\_ Expiration \_\_\_\_\_ Security Code \_\_\_\_\_

I authorize the City of Missouri City and the financial institutions listed above to automatically debit my bank account or charge my credit card for Golf Course payments on the 1<sup>st</sup> day of each month. I understand that it is my responsibility to notify the City of Missouri City, in writing, if I make any changes to this agreement, or if I close this bank account. This authorization will be in effect until the end of the term of the annual pass for which the agreement was signed. **This agreement acknowledges that I am responsible for the account number(s) above and will indemnify the City against any loss or damage from delayed payments resulting from incorrect or incomplete information. There is a \$30 non-sufficient fund charge on all returned items, which must be paid with the original amount.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**FOR CITY USE ONLY**

Reviewed by \_\_\_\_\_ on \_\_\_\_\_  
name date