



REFUND GOLF CARDS

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|--|--|---|---|
| <input type="radio"/> UNLIMITED START DATE: END DATE: | <input type="radio"/> KACHINA START DATE: END DATE: | <input type="radio"/> TWILIGHT START DATE: END DATE: | <input type="radio"/> COYOTE START DATE: END DATE: |
| OWNER NAME/ADDRESS/PHONE NUMBER | | OWNER NUMBER | |

REASON FOR REFUND -- See attached Doctor's letter

(PLEASE NOTE THAT YOUR GOLF CARD WILL BE DEACTIVATED IMMEDIATELY)

YES

NO

I understand this refund for golf is an exception.

Policy Title: Refunding Prepaid Golf Cards, G01

A refund request can be made by submitting the refund request form, if one of the following criteria is met:

2.1.1 Death of the cardholder

2.1.2 A physician's order stating the cardholder cannot continue to play golf

OWNER SIGNATURE: _____ DATE _____

MEMBERSHIP SPECIALIST: _____