



FCCC YEARLY CART MEMBERSHIP

Name: _____ Date: _____

Address: _____ Phone #: _____

Cost: _____ 1 Cart Membership (One (1) cart available to member or family at any one time)
_____ \$500.00/yr. Up Front*
_____ \$50.00/month

_____ 2 Cart Membership (Two (2) carts available to member or family at any one time)
_____ \$750.00/yr. Up Front*
_____ \$70.00/month

*If choosing Up Front option payment must accompany this application.

Family includes:

- a. Spouse
- b. Unmarried children of the member between the ages of sixteen (16) and twenty-five (25) years of age who are in school or living at home.

I agree that the cart membership is for one full year and that upon signing this Agreement I am obligated to pay the cost as set forth above for one year.

Signature: _____ Date: _____