

Hill Farm Swim Club, Inc.

Est. 1960

Payment Authorization

Please provide the following information for payment of dues and/or stock purchase. Be sure that the name and the address are either as shown on the credit card or are affiliated with the card. Types of cards accepted include VISA & MasterCard. A check made out to HFSC is also acceptable.

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

In order to receive a receipt, please provide an appropriate email address.

Please select the appropriate membership type. If you currently hold a family membership and have not been contacted by the membership chair regarding an individual or couple membership, choose family membership. Only new members should select Stock Purchase, as is appropriate.

- | | | |
|---|---|--|
| <input type="checkbox"/> Family Membership Dues + tax | = | \$784 check, \$815 credit card |
| <input type="checkbox"/> Individual Membership Dues + tax | = | \$392 check, \$405 credit card |
| <input type="checkbox"/> Adult Membership Dues + tax | = | \$588 check, \$610 credit card |
| <input type="checkbox"/> Summer Pass Dues + tax | = | \$790 check, \$820 credit card
(new members only) |
| <input type="checkbox"/> Stock Purchase + tax | = | \$738.50 (new members only) |

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date (MM/YYYY): ____ / _____ 3-digit CVV/C code: _____

We look forward to a fun summer at Hill Farm Swim Club!

Please mail completed form to:

HFSC Membership
P.O. Box 5004
Madison, WI 53705

