

Programs & Teams – Payment Plan Authorization

YES, I would like to enroll in the Whitefish Mountain Resort Programs/Teams Payment Plan option. This enables me to pay for my 2010-2011 Snow Sports Program in 2 equal payments.

<u>Program</u>	<u>2 equal payments of:</u>	<u>Team</u>	<u>2 equal</u>
<u>payments of:</u>			
Buckaroos	\$130.00	Jr Freestyle	\$235.00
Half Pints	\$100.00	Freestyle 1 Day	\$262.50
Devo Program	\$127.50	Freestyle Weekend	\$350.00
Ladies/Mens Full Day	\$147.50	Jr Race Team	\$277.50
Ladies/Mens Half Day	\$110.00	Race Team 1 Day	\$382.50
Pathfinders	\$162.50	Race Team 2 Day	\$470.00
Custom Group Half Day	\$757.50	Race Team 3 Day	\$575.00
Custom Group Full Day	\$1,020.00	Race Team 4 Day	\$705.00
		Race Team Academy	
\$1,000.00			

***I understand that I am not fully registered until the 2nd payment is processed on 11/1/2010.**

***I understand that I MUST join the payment plan program ON OR BEFORE SEPTEMBER 30th 2010.**

***I understand that if for any reason I stop making payments at any point during the payment program, I will be refunded the amount I have paid, less a \$25 processing fee in the form of the credit card identified below or cash withheld from the refund if paid by cash/check.**

PROGRAM OR TEAM PARTICIPANTS ENROLLED IN THE PAYMENT PLAN

OPTION:

(Please print names of participants in corresponding spaces below)

Address _____ City _____

State _____ Zip _____

Phone _____

Email _____

Participant _____ Program/Team _____

DOB _____

Participant _____ Program/Team _____

DOB _____

Participant _____ Program/Team _____

DOB _____

Whitefish Mountain Resort ■ PO BOX 1400 ■ Whitefish, MT. 59937 ■ p: 406-862-2990 ■ f:
406-862-2922

CREDIT CARD INFORMATION

VISA MASTERCARD AMERICAN EXPRESS DISCOVER/NOVUS

Today's Date: _____

Please note you may need to inform you credit card issuer of your participation in this program.

Name as it appears on the credit card (*print*)

Credit Card Number _____

(Full credit card number must appear)

Expiration Date: _____ (If card is to expire before 11/2010 it is your responsibility to contact WMR with new information)

Handwritten Signature REQUIRED:

Security Code _____ (Security code is 3-digit code on back of MasterCard, Visa and Discover. Amex is 4-digit code on front of card.)

You may change the credit card number at any time by filling out a new Payment Plan Authorization Form stating the new credit card number and expiration date.

CASH OR CHECK

If I choose not to provide a credit card, I understand it is my responsibility to either send a check or money order by mail or to pay in person at the Base Lodge on or before November 1, 2010, Whitefish Mountain Resort will **not** call me to remind me it is due.

Signature _____ Today's

Date _____

OFFICIAL USE ONLY:

1st PymtRcvd _____ Initials _____

2nd PymtRcvd _____ Initials _____

Added to Spreadsheet: _____

Customer # _____

