



*Rockport Country Club*

**GOLF PRIVILEGES CANCELLATION**

The undersigned member hereby authorizes the Rockport Country Club Members Association to CANCEL the following privileges as indicated below. I understand that this cancellation will be effective on the 1<sup>st</sup> day of the next billing cycle. (Please circle)

**BAG STORAGE**

**LOCKER RENTAL**

**HANDICAP FEES**

**PRIVATE CART REGISTRATION**

**MEN'S GOLF ASSN**

**LADIES GOLF ASSN**

**PLAYER DEVELOPMENT SINGLE**

**PLAYER DEVELOPMENT FAMILY**

**OTHER:** \_\_\_\_\_

\_\_\_\_\_  
**Member Account #**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**