



3-Pay Dues Payment Program – NEW MEMBERS

Must be submitted with application – CREDIT CARD PAYMENTS ONLY!

This agreement is executed this _____ day of _____, 20_____.

I, _____, an official company representative for
PRINT COMPANY CONTACT NAME

_____ is joining the St. Croix Valley Home
PRINT COMPANY NAME

Builders Association (SCVHBA) and wish to take advantage of the **SCVHBA 3-Pay** program. As such, I/we agree to the following terms and conditions of the **SCVHBA 3-Pay** program.

My signature below authorizes the SCVHBA to debit the credit card I have provided in order to pay for my annual renewal dues to the SCVHBA. I further understand that the annual dues to the SCVHBA is \$435.00, and because I have chosen to exercise the **SCVHBA 3-Pay** program a \$7.50 process fee will be added to the annual dues stated above to offset any transaction charges.

Your membership will not be approved by our Board of Directors until all 3 payments are processed; therefore all benefits/resources from NAHB & WBA will not be available to you until full payment is received. Any pending member can still be involved at our monthly meetings, but will not be listed in our Membership Directory and/or website until final approved by the Board is completed and full payment is received.

There are no refunds in this program, and payments made until the third payment will be considered a donation to the SCVHBA in support of the industry if not all three payment are paid in full. The first payment will be processed upon receiving this completed form. The following two payments will be processed on the 1st of each month. Three equal payments of \$147.50 will be made over three consecutive months.

I agree to the terms and conditions of the **SCVHBA 3-Pay** program and understand that my credit card will be on file for the reoccurring payments.

Authorized Member Signature _____ Date _____

PLEASE PRINT INFORMATION BELOW:

Name on Card _____ Expiration Date _____

MasterCard or Visa # _____ Security Code: _____

Address on Card _____

SCVHBA EO Signature _____ Date _____