



SUITE SHOTS

# INDOOR SIM PASS APPLICATION

3400 JAMES WAY S | FARGO | 58104  
INFO@SUITESHOTS.COM | SUITESHOTS.COM

## PERSONAL DETAILS:

FULL NAME:

BIRTH DATE: (MM/DD/YYYY)

## BILLING INFORMATION

ADDRESS:

CITY / STATE / ZIP:

EMAIL:

OFFICE PHONE:  CELL PHONE:

## SIMULATOR PASS DESCRIPTION:

First priority goes to SIM areas that are booked for parties, events, & other functions. Suite Shots reserves the right to limit or modify membership access.

**TERMS:** By signing this application, I acknowledge that I agree to the collection, use and processing of the personal information I provide in this membership application for the purposes of organization administration, payment of my dues, and Suite Shots correspondence. I acknowledge that my electronic signature on this document is legally equivalent to my handwritten signature.

**TO CANCEL RECURRING PAYMENTS:** Must contact Suite Shots at least 5 Business days before next bill date.

SIGNATURE

DATE

## INDOOR SIMULATOR

Monday - Friday | 10am - 4pm  
Max 2 hours per visit

**\$75 / Month** + sales tax

- Indoor Simulators only

**\$100 / Month** + sales tax

- Indoor Simulators + Outdoor Bay Time

## PUTTVIEW ADD-ON

Monthly Add On (\$60/month)

Yearly Add On (\$500/year)