



3-Pay Dues Payment Program

1041 Village Park Drive Suite 102 Greensboro, Georgia 30642
Phone 706-999-1591 Fax 706-999-1593 • www.LobaLive.com

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

I, _____, an official company representative for

PRINT COMPANY CONTACT NAME

_____ is joining/renewing our membership in

PRINT COMPANY NAME

the **Lake Oconee Area Builders Association** and wish to take advantage of the **LOABA 3-Pay** program. As such I/we agree to the following terms and conditions of the **LOABA 3-Pay** program. I understand that annual dues to the LOABA (which include my dues to the National Association of Home Builders, and Home Builders Association of Georgia) are **\$545**.

The full 3-in-1 membership (LOABA, HBAG and NAHB) will take effect on your final payment. There are no refunds on this program; any payments made until the third payment will be considered a donation to the LOABA in support of the industry.

Please check one option:

- Check Payments:** I am taking advantage of the **LOABA 3-Pay** program and will be paying by check or money order. My first payment of \$182 will accompany this agreement and is payable upon receipt; my next 2 payments (\$181.50 each) will be made by the last business day of the next 2 months.
- Credit Card Payments:** The first invoice will be for \$182, payable upon receipt. I agree to pay the following invoices (\$181.50 each) over the next two months, by the last business day of each month. Please call with credit card number.

I agree to the terms and conditions of the **LOABA 3-Pay** program.

Authorized Member Signature _____ Date _____

LOABA EO Signature _____ Date Received _____

Date of 1st payment _____ 2nd payment _____ 3rd payment _____