

skydive chicago, inc.

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2017 SDC Unlimited: Monthly Membership Agreement

Last Name		First Name		USPA License # (or Equiv.)	
Mailing Address			City	State	Zip Code
E-mail Address			Phone Number		

By signing this agreement, I agree, understand and accept the following terms:

- Full payment must be made on my account in advance.
- Monthly membership includes unlimited jumps for the specified calendar month(s) at Skydive Chicago only.
- Double manifesting is NOT allowed.
- Monthly membership jumps are only valid for SDC aircraft (Minimum of one SDC aircraft will be available each day).
- No one else may use my monthly membership jumps and it cannot be transferred to anyone else.
- Monthly membership jumps can only be used for full altitude or hop & pop jumps. (Not valid for high alt. or formation loads)
- I must be a current, licensed skydiver to qualify for the SDC Unlimited Membership.

Date of Last Jump: _____ Total # of Jumps: _____

_____ Initial

IMPORTANT NOTICE

- Skydive Chicago reserves the right to refuse or revoke monthly memberships to anyone, for any reason, at any time.
- Prices are subject to change without notice.
- There are NO refunds.

_____ Initial

Indicate Month(s) to purchase:

Monthly Rates:

- May: \$1,400
- June: \$1,700
- July: \$2,000
- August: \$2,100
- September: \$1,600
- October: \$1,250

Total Due: _____

- I Agree to pay the total due above for the indicated months.

_____ Initial

_____ Date

_____ Signature