## Central Community Services Department Salary Deduction Authorization

below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I leave fill in your state of the payment in the pay	am committing to the variation of the variation including including including including including including including including including the variation of the	he full payment of njury.  ducted	(one time payment) riod (//)  _(W)(H) :SR
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I leave fill in your state of the payment in the pay	reason including is the reason including is reasonable.  Full amount deducted is reasonable reasonable.  Telemostrice use only**	he full payment of njury.  ducted d over a 3 month pe  arly and completely)  : P.O. Box #  Date:	(one time payment) riod (//)  _(W)(H) :SR
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I leave fill in your leave fill in your leave fill in your leave fill in your leave Signature:  Employee Signature:	am committing to the variation of the variation including including including including including including including including including the variation of the	he full payment of njury.  ducted d over a 3 month pe  arly and completely)  : P.O. Box #  Date:	(one time payment) riod (//)  _(W)(H) :SR
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I have the property of	am committing to the variation of the va	he full payment of njury.  ducted d over a 3 month pe  arly and completely)  : P.O. Box #	the amount listed above  (one time payment)  riod (//)  _(W)(H)  :
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I have the property of	am committing to the variation of the va	the full payment of njury.  ducted d over a 3 month per arly and completely)  : P.O. Box #	the amount listed above  (one time payment)  riod (//)  _(W)(H)  :
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method: I leave fill in your payment method: I leave fill in your leave f	am committing to the variation of the va	he full payment of njury.  ducted d over a 3 month pe  arly and completely)  :	(one time payment) riod (/)  _(W)(H)
below. By signing, I understand that I a and that no refunds will be given for any Please choose your payment method: I have the significant of th	am committing to the variation of the variation including including including including including including including including the variation of the variation	he full payment of njury.  ducted d over a 3 month pe	(one time payment) riod (/)
below. By signing, I understand that I a and that no refunds will be given for any  Please choose your payment method:	am committing to the variation of the va	he full payment of njury.  ducted d over a 3 month pe	the amount listed above (one time payment)
below. By signing, I understand that I a and that no refunds will be given for any Please choose your payment method:	am committing to the reason including in the following in the second in	he full payment of njury. ducted	the amount listed above (one time payment)
below. By signing, I understand that I a	am committing to the	he full payment of	
I undersigned hereby authorize Central Community Services Department to deduct SR( SR) cost of Annual Rolling Hills Golf Club Greens Fee (as listed above) equally divided between my salary for the first 3 months of the 2025 Calendar year or one time as indicated below. By signing, I understand that I am committing to the full payment of the amount listed above and that no refunds will be given for any reason including injury.			
Member Name:			e e =====
Member Name:	Gender: M /	F Adult / Junior	Bag Tag:
Member Name:	Gender: M /	F Adult / Junior	Bag Tag:
Member Name:	Gender: M /	F Adult / Junior	Bag Tag:
Member Name:	Gender: M /	F Adult / Junior	Bag Tag:
(Saudi Aramco Holidays)  Grand total to be deducted: SR			
Junior (under 21) Non-Dhahran residents (Fri - Sat only)		_ membership(s) = _	SR
Junior (under 21) Assoc. Non-Member (weekdays		<b>.</b> . ,	
Adult Association Non-Member (weekday) Junior (under 21) Association Member (weekday)			
Adult Non-Dhahran residents (Fri - Sat only) (Saudi Aramco Holidays)	3000SR x	$membership(s) = \_$	SR
Adult Golf Association Member (weekdays)		• • •	
Junior (under 21) Association Non-Member	2750SR x	_ membership(s) =	SR
	2250SR x	_ membership(s) =	SR
Junior (under 21) Association Member	5500SR x	_ membership(s) =	SR
Adult Association Non-Member  Junior (under 21) Association Member		$\underline{}$ membership(s) =	SR