

FAMILY RECREATIONAL MEMBERSHIP

Account Number _____

Date _____

FOR VALUE RECEIVED FORT CLARK SPRINGS ASSOCIATION, INC. hereinafter referred to as "Assignor" does (do) hereby grant assign to _____

_____, hereinafter referred to as "Assignee" all of Assignor's right, title and interest in and to that certain FORT CLARK SPRINGS ASSOCIATION FAMILY RECREATIONAL MEMBERSHIP, pursuant to the provisions of the Declaration of Protective Restrictions, the By-Laws and the Rules and Regulations of the Fort Clark Springs Association, Inc.

Assignee, by acceptance of this Assignment of all the Assignor's right, title and interest in and to the FORT CLARK SPRINGS ASSOCIATION FAMILY RECREATIONAL MEMBERSHIP, agrees to be bound by the terms and provisions of the Declaration of Protective Restrictions, the By-Laws and the Rules and Regulations of the Fort Clark Springs Association, Inc.

This membership is non-transferable by Assignee. Assignor reserves the right to cancel said membership if Assignee fails to make monthly assessment payments per the Declaration of the Protective Restrictions, By-Laws and the Rules and Regulations of the Fort Clark Springs Association, Inc., as they become due.

Pay \$173.21 which includes the first month assessments of \$43.21. You will receive payment coupons for your additional monthly payments.

MEMBERS LETTING THEIR MEMBERSHIP LAPSE FOR NON-PAYMENT OF ASSESSMENTS OR VOLUNTARY CANCELLATION, MUST PAY ANY BACK ASSESSMENTS NOT TO EXCEED ONE (1) YEAR, PLUS A \$200.00 REINSTATEMENT FEE, IN ORDER TO HAVE THEIR MEMBERSHIP REINSTATED. (INITIAL _____)

SHOULD YOU DESIRE TO CANCEL YOUR MEMBERSHIP, YOU MUST REQUEST A CANCELLATION FORM.

SHOULD YOU DESIRE TO DROP YOUR MEMBERSHIP, NO REFUND WILL BE GIVEN. THE ONLY EXCEPTION: If a holder of a Family Recreational Membership (FRM) purchases a Regular Membership, at the time of purchase any remaining balance of assessments on the FRM account can be transferred to the Regular Membership account. The member must request this transfer at the time of purchase of the Regular Membership.

ASSIGNOR

ASSIGNEE

FORT CLARK SPRINGS ASSOCIATION, INC.

Signature

Signature

P. O. Box 345

Address

Brackettville TX, 78832

City State Zip

Telephone Number

Member No. _____

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF ASSIGNMENT

FORT CLARK SPRINGS ASSOCIATION, INC., approves and consents to the above Assignment and hereby acknowledges receipt of Notice of foregoing Assignment and of the assignment fee in the amount of _____.

FORT CLARK SPRINGS ASSOCIATION, INC.

BY _____