

CASTLE EVENTS

18 Juniper Hill Drive, Raynham, MA 02767

JeanneCastiglione@comcast.net

Jeanne@HGLMedia.com

www.NortheastGolfShow.com

P: (508) 823-0389 F: (508) 822-1292

ELECTRONIC PAYMENT FORM Northeast Golf Show

CUSTOMER INFORMATION

Company/Customer Name: _____

Contact Name: _____ Phone: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Booth # _____

Return completed form to:

Fax:
(508) 822-1292

Email:
JeanneCastiglione@comcast.net
Jeanne@HGLMedia.com

Mail:
18 Juniper Hill Drive
Raynham, MA 02767

Any information sent via E-Mail or Fax is not secure and is being transmitted at sender's own risk.

CREDIT CARD INFORMATION

Account Type: ___ VISA ___ MASTERCARD ___ DISCOVER

Card Number: _____

Expiration Date: _____ Security Code: _____

Amount to Charge: _____ Cardholder Name: _____

___ Check Here if Billing Address is the same as address above.

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Cardholder Signature: _____

It is the Customer's responsibility to inform Castle Events of any changes to the billing address, expiration date and/or changes to the card holder's name on credit card account provided.

ACH PAYMENT INFORMATION (If payment preferred via ACH, please see below for bank info)

Account Holder Name: Castle Events LLC

Phone: (508) 823-0389

Billing Address: 18 Juniper Hill Drive, Raynham, MA 02767

Name on Account: Castle Events LLC

Account Type: Business Checking

Bank Name: Santander N.A.

Bank Address: 601 Penn Street, Reading, PA 19601

Account #: 5561078062 Routing #: 231372691 SWIFT Code: SVRNUS33

Authorization

I authorize Castle Events LLC to debit the credit card account provided above for payment for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account. I also understand that this authorization will remain valid and continue until I cancel such authorization in writing.

Authorized Signature: _____ Date: _____