



SPONSORSHIP CREDIT CARD AUTHORIZATION

Name of Member or Non-Member: _____

Name of Firm or Company: _____

Name of Credit Card Holder if different that above: _____

Credit Card:

VISA Master Card American Express Discover

Sponsorship Amount: \$ _____

Name of Sponsorship Level: _____

Billing Address of Credit Card you are using:

street address

city

state

zip

Contact Phone Number: _____

Contact Email Address: _____

Credit Card Number*: _____

Credit Card Expiration Date: ____/____

3-digit Security Code (4 digits for American Express): _____

Signature of Card Holder

CREDIT CARD NOTES/REFUND POLICY:

This charge will appear on your credit card statement as. "**ClubExpress.com**" All payments are final. We do not provide refunds for membership signups and renewals, event registrations, donations, storefront purchases, or other misc. charges. Please carefully review the charge(s) checked above and be sure you know what you are paying for. *If you prefer to provide your credit card number by phone, please complete the rest of this document and send to awla.execadmin@gmail.com and call Alexis or Joanne at (602) 218-5273 to provide the numbers.