

# NORTHEAST GOLF SHOWS LLC

## ELECTRONIC PAYMENT FORM

### Northeast Golf Show

18 Juniper Hill Drive, Raynham, MA 02767

[JeanneCastiglione@comcast.net](mailto:JeanneCastiglione@comcast.net)

[Jeanne@HGLMedia.com](mailto:Jeanne@HGLMedia.com)

[www.NortheastGolfShow.com](http://www.NortheastGolfShow.com)

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

#### 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](mailto:JeanneCastiglione@comcast.net)  
[Jeanne@HGLMedia.com](mailto: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\*\*: \_\_\_\_\_

**\*\*SECURITY CODE REQUIRED for CC PAYMENT PROCESSING\*\***

**\*Please note that per Northeast Golf Shows LLC policy, there is an additional 3% convenience fee for  
credit card processing.\***

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  
Northeast Golf Shows LLC  
of any changes to the billing  
address, expiration date  
and/or changes to the card  
holder's name on credit card  
account provided.

Surcharge fees are used to  
cover charges accrued from  
financial institutions when  
processing credit card  
transactions and Northeast  
Golf Shows LLC does not  
profit from collected fees.

**\*\*SECURITY CODE  
REQUIRED for CC  
PAYMENT PROCESSING\*\***

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

Account Holder Name: Northeast Golf Shows LLC

Phone: (508) 823-0389

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

Name on Account: Northeast Golf Shows LLC

Account Type: Business Checking

Bank Name: Santander N.A.

Bank Address: 601 Penn Street, Reading, PA 19601

Account #: 9536922975 Routing #: 231372691 SWIFT Code: SVRNUS33

#### Authorization

I authorize Northeast Golf Shows 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: \_\_\_\_\_