NORTHERN DUNES GOLF CLUB 2022 SPONSORSHIP FORM

SPONSORSHIP CONTACT INFO: Print Clearly. FIRST NAME: _____LAST NAME: _____ ADDRESS: CITY:_____POSTAL CODE:____ EMAIL: PHONE NUMBER: PAYMENT INFO: Must fill out all sections of payment information. PAYMENT TYPE: (please check one) COMPLETED BY EMPLOYEES ONLY: ☐ CASH SPONSORSHIP PRICE(pre-tax):_____ ☐ DEBIT SUBTOTAL: ☐ CHEQUE TAXES: _____ TOTAL: ☐ VISA ■ MASTERCARD EMPLOYEE'S FULL NAME: NAME ON CREDIT CARD: CREDIT CARD NUMBER: EXPIRY DATE: PURCHASE DATE: By signing below, I acknowledge that I have both read and filled out this application form in its entirety and understand all terms and conditions. X_____