

TURKEYFOOT ISLAND CLUB

NEW YEAR'S EVE CELEBRATION

NAME _____ NO. ATTENDING _____

GUEST'S NAMES _____

SEATING PREFERENCE _____

PAYING BY ☐ Check ☐ Credit Card

CREDIT CARD AUTHORIZATION FORM

SELECT ONE: ☐ Discover ☐ Mastercard ☐ Visa ☐ American Express

Authorized Amount \$ _____ *(plus 3% transaction fee)*

CARD NUMBER _____

EXPIRATION DATE _____ CCV CODE (3 or 4 digit) _____
MM/YY

PRINTED NAME _____

AUTHORIZED SIGNATURE _____

PLACE
POSTAGE
HERE

TURKEYFOOT ISLAND CLUB
ATTN: STEFFANI VICKERS
4528 LAHM DRIVE
AKRON, OHIO 44319