



CREDIT CARD AUTHORIZATION

I hereby authorize ***River Strand Golf & Country Club*** to charge my listed credit card for the Quarterly Assessments plus any charges I have incurred at the club. I understand that my credit card will be charged on the **1st (first) day of every calendar month.** (If the first falls on a weekend or holiday, the debit will be processed on the following business day). I also understand that my card will be charged the full amount owed to River Strand at the end of every month.

By: _____
Signature

Print Name

Please begin automatic charge effective:

Member Number:

River Strand Property Address:

River Strand Golf & Country Club
7155 Grand Estuary Trail
Bradenton, FL 34212

Please enter the card information below:

Card Type: Visa ☐ MasterCard ☐ American Express ☐

Credit Card # _____ Exp: _____

Name as it appears on card: _____ Security Code: _____
(3 digit code on back of visa/mc or 4 digit code on front of Amex)

Billing address: _____ City: _____

State: _____ Zip code: _____

Once the card information is entered into our secure database this page will be shredded.