



2025 Me & My Girl Dance- Credit Card Authorization Form

I, _____, hereby authorize Shackamaxon Country Club, Scotch Plains, New Jersey, to charge my credit card as noted below. I acknowledge that tax and club service charge are additional to the advertised registration fee. Charges will not be processed until closer to the event date.

Number of Non-Member Adults (\$75++): _____

Number of Non-Member Children 6-12 (\$45++): _____

Number of Non-Member Children 5 & Under (\$25++): _____

Card Type (Circle one): AMEX VISA M/C DSCVR

Please indicate if the credit card is a Corporate Card: Yes or No

Name of Organization (If applicable): _____

Credit Card #: _____

CSV Code (Security code): _____ Expiration Date: _____

Credit Card Billing Address with Zip Code:

Name on Credit Card: _____

Signature of Cardholder: _____

Date: _____

Please email to mmiller@heritagegolfgroup.com. Please provide your email address for a receipt:
