Torrey Pines Club Corporation Credit Card Authorization Form

INSTRUCTIONS: Please complete this form to authorize Torrey Pines Club Corporation to charge the credit card listed below. To fill out the form and submit it using your computer or mobile device, please use the latest version of Adobe's Acrobat Reader app (https://get.adobe.com/reader/). To fill out the form manually and submit using regular mail, please download and print this form. Mail the completed form to the address provided at the bottom of the page. You can also scan the form and email as an attachment to support@torreypinesgolfstore.com. You may also FAX this form to: 858 452 3277.

Billing In	formation:								
Name on card				Р	hone				
Company					Email				
Billing							suite,		_
address City					box, etc State Zip				
City							ΖΙΡ		
Gift Car	d Information:								
	Gift Card Description	[recipient's name	/ award name	e / etc.]		Value	Qty.	Total	
						+			
							Subtotal:		
Credit (Card Information:	VISA	MC	AMEX	DISCO	OVER			
Card				Ехр	,	CVV			
Number					Date	m yr	CVV	card verify	_ value
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"I,	on Agreement:		hor	oby autho	rizo Torroy D	ines Club Cc	orn to char	ao my	
_	d account in the amount of					cates issued I		gemy	
The Golf Sh	nop at Torrey Pines in the do		cribed above. I	agree to I	be bound b	y the terms a	and conditi		
	n, and I understand the gift of I and that I will not dispute t		•	_		_			
agreed up		, ,	-	, ,	J		·		
By signing	and dating this form you giv	a us narmission to	dehit your acc	ount in the	amount sh	own in the			
	eld. All information provided				arrount sin	SWIT IIT LITE			
				/	/				
Cardholde	r Signature			mm (dd yy)	/y			
							NA ALC		
address	11480 N. Torrey Pines Ro	oad, La Jolla, CA	92037				44	x 44.	
email	support@torreypinesgol							orrey	
phone	800 985 4653 858 452	3226 f	ax 858 452	3277			- 50	Pines	