



GRAYHAWK

I, _____, authorize Grayhawk Golf Club to charge my credit card in the amount of \$_____. For the purchase of:

MERCHANDISE – DESCRIPTION

	Sku#	Quantity	Amount
SUB TOTAL			

FOOD & BEVERAGE – DESCRIPTION

	Amount
SUB TOTAL	

GREEN FEES

Date of Play	Name of Group	Tee Time	No. of Players	Amount
SUB TOTAL				
TOTAL				

BILLING INFORMATION

Visa Mastercard AmEx Discover

Name on Card: _____

Credit Card Number: _____ Exp: _____ CV2 Code: _____

Billing Address: _____

Phone: _____ Email: _____

Signature _____

By signing this agreement, I authorize Grayhawk Golf Club to charge my credit card for the total amount shown above.

Please fill out the information and email the form back to golfshopmgr@grayhawkgolf.com

You may also fax back to Grayhawk Golf Club at 480.502.3164