

Credit Card Authorization Form

Mailing Address:
Elkhart Lake's Road America, Inc.
Attn: Julie Cudworth j cudworth@roadamerica.com
PO Box 338
Elkhart Lake, WI 53023



This letter constitutes an authorization to use my credit card, (Visa, MC, Discovery, & Amex):

CC# _____ Exp Date: _____

CVV#: _____

Name as imprinted on card: _____

Billing Address: _____

City, State, Zip: _____

Phone Number: _____ - _____ - _____

Fax Number: _____ - _____ - _____

Email Address: _____

Team Name: _____



For payment of fees associated with the event: **IMSA AUGUST 2-5, 2018**

2018 Golf Car Prices Number needed:

4-pass = \$410 (3 day minimum), additional day \$137

2-pass = \$330 (3 day minimum), additional day \$110

Utility = \$440 (3 day minimum), additional day \$147

6-pass = \$500 (3 day minimum), additional day \$167

8-pass = \$600 (3 day minimum), additional day \$200

**Note:
NO
GUARANTEE OF
TOPS,
WINDSHIELDS
OR LIGHTS FOR
ALL RENTALS**

Golf car(s) is needed the following days: Wed ____ Thurs ____ Fri ____ Sat ____ Sun ____

Authorized Signature of Cardholder: _____ Date: _____

Credit card information will be destroyed following the payment of all event-related expenses