



## ***Pub Night Non-Member Payment Form***

### **Credit Card Payments:**

**The cost is \$25 per person.** Charge my VISA, MasterCard, Discover or American Express account:

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

How many tickets? \_\_\_\_\_ Names of ticket holders: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**For credit card payments, email this form to: [mary.prenon@hgar.com](mailto:mary.prenon@hgar.com) or fax to (914) 681-6044**

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