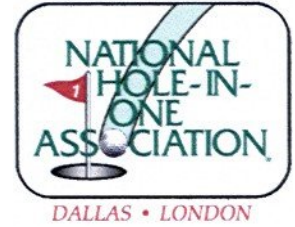


**ACH/Debit Payment Form**

419 Parkwood Lane  
Coppell, TX 75019  
Email: [info@golftournamentshop.com](mailto:info@golftournamentshop.com)  
866-368-2469  
Fax 972-421-1580



I hereby authorize National Hole-In-One Association to initiate a debit to my checking/savings account (circle one) at the depository financial institution named below. An additional charge will be processed via ACH/Debit from my bank account for shipping and handling once the product is shipped. If any item is returned unpaid, I authorize an additional returned check fee for the said item of the maximum amount as allowed by the state to be charged to this account.

The form can be submitted via e-mail at [info@golftournamentshop.com](mailto:info@golftournamentshop.com) or faxed to 972.421.1580. Please print clearly to help us avoid any processing errors.

Payment for the products will be processed at the time the order is placed. All orders will begin production after receipt of this signed and ACH/Debit payment form.

Company Name: \_\_\_\_\_

Name on Bank Account: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Bank name: \_\_\_\_\_ Account #: \_\_\_\_\_

Routing: \_\_\_\_\_ Amount Debited not to exceed: \_\_\_\_\_

I understand that my bank account will be drafted via ACH/debit for product cost and all shipping charges. I authorize National Hole-In-One Association to debit my bank account for the products purchased and related shipping costs.

X \_\_\_\_\_  
Printed Name

X \_\_\_\_\_  
Authorized Signature