



District 1-A

District/State Dues Form

Club Name	
Club #	
Payment Amount *	
Type of Credit Card (MC/VISA/DISCOVER/ AMEX)	
Name on Card	
Account Number	
Card Expiration	
Security Number on Back of Credit Card (3 or 4 digits)	
Billing Address	
Comments	

***Please note:** A credit card fee of 3.8% will be added to cover the cost of processing.

Please forward to CT Barb Elsey @ 1adistricttreas@gmail.com for processing.