



# District 1-A

## District/State Dues Form

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

**\*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](mailto:1adistricttreas@gmail.com) for processing.