



NAPLES GRAPE FESTIVAL
SEPTEMBER 26TH & 27TH, 2026
10:00am – 5:00pm (Rain or Shine)

Naples NY
Rotary
Club



2026 CREDIT CARD FORM

FILL IN ALL NECESSARY INFORMATION BELOW IF PAYING BY CREDIT CARD AND RETURN WITH APPLICATION.
WRITE CLEARLY & ACCURATELY

Name As It Appears On Card: _____

Credit Card Billing Address: _____

(Street Address)

(City, State, Zip Code)

Telephone No. of Card Holder: _____

CC Acct. No. As Shown On Card: _____

Expiration Date: _____

CVV Code (On Back of card): _____

\$ Amount to Charge Credit Card: _____

Email Address to mail receipt to: _____

Name of Person Authorized to provide the above credit card info.: _____

Phone Number for Authorized Person providing information: _____

Signature of Individual Authorizing Charge: _____