



HOSPITALITY 10

PAYING BY CHECK (PLEASE FILL OUT THIS SECTION ACCURATELY) [] CHECK

FIRST _____ MI _____ LAST _____

DATE OF BIRTH ____/____/____ HOME PHONE ____-____-____

ADDRESS _____ CITY _____ STATE _____

EMAIL _____ REFERRING MEMBER _____

SIGNATURE X _____ DATE ____/____/____

PLEASE MAKE ALL CHECKS PAYABLE TO **HOSPITALITY 10 CARD INC. AND MAIL TO:*

PO BOX 90382

STATEN ISLAND, NY 10309

GIFT INFORMATION (PLEASE FILL OUT THIS SECTION WITH INFORMATION OF PERSON YOU ARE BUYING FOR)

FIRST _____ MI _____ LAST _____

PHONE # ____-____-____

ADDRESS _____ CITY _____ STATE _____

EMAIL _____

MESSAGE: _____

SIGNATURE X _____ (PLEASE SIGN TO CONFIRM ALL INFO IS ACCURATE)

Please make all checks payable to Hospitality 10 Card Inc. and send to PO Box 90382 Staten Island, NY 10309. Hospitality 10 Card Inc will not absorb any bounced check or non-sufficient fund fees. The purchaser is responsible for any charge back fee due to non-sufficient funds and will be liable to paying Hospitality 10 Card Inc. a \$19.99 penalty fee.