

## 2025 CTCPA NATIONAL FINALS PAYMENT INFORMATION FORM

**Name:** \_\_\_\_\_

**Payment Type:** \_\_\_\_\_ (ONLY Cash, Cheque, Visa, Mastercard or E-Transfer) Please send e transfer to [nationalfinalspayment@gmail.com](mailto:nationalfinalspayment@gmail.com) also include in comments the rider you are paying for. If paying by credit card and you do not want to use this form, please call Wendy @ 403-829-5088 to give her your number.

*A credit card fee of 4% will be charged for transactions. Please note this change is for payment by credit card only. You will still have the option to pay by check or e transfer without any additional fee.*

**Credit Card Number:** \_\_\_\_\_ **Expiry Date:** \_\_

**Total Amount:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please provide details if making a payment for someone else:**

**Name:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

Submit form via **Email:** [ctcpaoffice@gmail.com](mailto:ctcpaoffice@gmail.com) / **Mail:** CTCPA 949 Briarwood Crescent, Strathmore, AB T1P1E8. Please send e transfer to [nationalfinalspayment@gmail.com](mailto:nationalfinalspayment@gmail.com) use the password "ctcpa" (if necessary) also include in comments the rider you are paying for.