



Credit Card Authorization

I, \_\_\_\_\_ authorize the ICPI Arizona Chapter to charge

(Print name as it appears on Credit Card)

\$ \_\_\_\_\_ to the following credit card. I further agree that if there is any dispute regarding the charged transaction, I will handle directly with the ICPI Arizona Chapter and will not dispute this transaction through my credit card company.

Card Type: Visa \_\_\_ MasterCard \_\_\_ Recurring Charge (Y/N): Date: \_\_\_\_\_

Card Number: \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_ CSV #: \_\_\_\_ Digits on back of card.

Expiration Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Cardholder Phone Number: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

(street number)

\_\_\_\_\_

(city) (state) (zip code)

Signature of Cardholder: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_