

Waxahachie Band Booster Club Inc.
Authorization Form for Credit Card Billing

If you would like to enjoy the convenience of using your credit card as a form of payment on designated charges, simply complete the Credit Card Information section below and sign the form. All requested information is required. We will bill your credit card for the amount you indicate only from a written request. This form and your information will be kept in confidence on file at the CPA office. This information will only be used at your request.

Customer Information

Student Name (Please print): _____

Payment Information

I authorize Waxahachie Band Booster Club Inc. to keep this information on file so I may use it as needed at my request. I will designate the amount when I request to use this as a form of payment.

Credit Card Information (To be completed by customer)

Waxahachie Band Booster Club Inc. accepts the following credit cards: Visa, MasterCard, Discover

Credit Card Type (circle one): Visa MasterCard Discover

Credit Card Number: _____

Expiration Date: ____/____

Cardholder's name: _____

(as shown on credit card)

Cardholder's Zip Code: _____

(from credit card billing address)

Cardholder's Daytime phone number: _____

Customer's signature: _____

Date: _____
