

# Credit Card Authorization Form

## Orcas Christian School



**BY THIS AGREEMENT**, Orcas Christian School Corporation is authorized to charge the credit card noted below in the amount of \$\_\_\_\_\_ for services noted on the preceding page/agreement.

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name on Account \_\_\_\_\_ 3 Digit Security Code \_\_\_\_\_  
(Found on Back of Card)

Address on Account \_\_\_\_\_

### Authority to Charge Account



This is your authority to charge my \_\_\_\_\_ account,  
(Type of Account)

No. \_\_\_\_\_ at the \_\_\_\_\_ Branch

\$ \_\_\_\_\_ . Funds are to be credited to \_\_\_\_\_ account,  
(Amount) (Type of Account)

No. \_\_\_\_\_ each \_\_\_\_\_ on the  
(Month, Week, Etc.)

\_\_\_\_\_ of each period until further notice.  
(Date)

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Does this revoke any prior authorization?  Yes  No