

Credit Card Authorization Form

Purchase Information
<input type="checkbox"/> Dues <input type="checkbox"/> REALTOR® Team Store Items <input type="checkbox"/> Event Registration <input type="checkbox"/> Event Sponsorship <input type="checkbox"/> Other: _____
Payment for (if anyone other than cardholder):
Total Amount to be Charged:
Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other
Cardholder Name (as shown on card):
Card Number:
Expiration Date (mm/yy): CVV:
Cardholder ZIP Code (from credit card billing address):

I, _____, authorize Southern Adirondack REALTORS® to charge my credit card above for agreed upon purchases.

Customer Signature

Date