

Credit Card Authorization Form

I _____ authorize the Auburn Recreation District to charge my
Please print clearly

Visa/Mastercard ending with the last four digits: _____

For the Amount of: _____ *Security Code on back of card: _____

For the purpose of: _____ Date & Time: _____

Signature

Date

Please fill out credit card information on the portion below. Once your card has been charged, the number will be shredded.

Street Address

City, Zip

Phone #

Processed by: _____ Date: _____ Receipt #: _____

This portion of the form will be detached and shredded after the transaction is completed.

VISA – CC#: _____ Expiration Date: _____

Mastercard – CC#: _____ Expiration Date: _____