

## CREDIT CARD AUTHORIZATION FORM

**Boys & Girls Club of Troy**

**3670 John R Road**

**Troy, MI 48085**

Child's Name: \_\_\_\_\_

Card Type:

Master Card

Visa

AMEX

Discover

Cardholder Information:

(Name and Address)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Credit Card Number:

\_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV2 Code: \_\_\_\_\_

(3 digits on back)

Cardholder Authorized Signature:

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

I authorize the agreed upon amount to be charged on my credit card.  
The terms and conditions of my cardholder agreement apply.