

## **Credit Card Authorization Form**

Name on the Card:			-
Name of Business:			
Type of Card: Visa	MC	AmEx Discover	]
	Other		
Card Number			
Expiration Date		_	
Security Code		_	
Billing Address			
City, State, Zip			-
Phone Number			
E-mail Address:			
Item(s) Purchased	Monthly membership dues		
Amount to be Charged	\$25.00 (\$50	0.00 Start-up)	
By signing this form, you authorize Rogue Valley Networking Council to charge your card for the amount listed above.			
Signed:		Date:	