



Credit Card Authorization Form

Name on the Card: _____

Type of Card: Visa ____ MC ____

Account number _____

Expiration Date _____

Security Code _____

Billing Address _____

City, Province, Postal Code _____

Phone Number _____

By signing this form, you authorize Prince Rupert & District Chamber of Commerce to charge your card for Chamber events when registered.

Signed: _____ Date: _____