CREDIT CARD AUTHORIZATION FORM

By filling out and signing this form, I hereby authorize

Service Club of Manatee County to charge my credit card account below.

AMOUNT TO BE CHARGED: \$______
Reference: Event Sponsorship

Card Holder's Signature ___

CREDIT CARD HOLDER INFORMATION AS IT APPEARS ON THE CARD

Name	
Billing Address	
City/State/Zip	
Phone	Cell
Email	
Please check credit card type:	
VISA MASTERCARD AMEX	
Card Number	
Exp. Date	Security Code

Please mail to: **Event Sponsorship Committee**, **P.O. Box 15435**, **Bradenton**, **FL 34280-5435** Service Club is a 501(c)(3) nonprofit organization.