



**Credit Card Authorization Form**

I, \_\_\_\_\_ authorize Presidential Women's Center to charge  
my credit card number \_\_\_\_\_ exp. date \_\_\_\_\_

C V V# \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ for services to be  
rendered to \_\_\_\_\_. Presidential Women's Center has not  
confirmed to me that the above named person has an appointment.

This authorization is valid (check one):

\_\_\_\_\_ This date only \_\_\_\_\_ (specify date)

\_\_\_\_\_ From dates \_\_\_\_\_ - \_\_\_\_\_

Any payment or overpayment not used will be refunded to the above credit card.

If additional funds are required, please provide a contact phone number:

(\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Please include a copy of ID & front and back credit card