





## Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO: NCFMA  
5 Meadow Lane, Redwood City, CA 94063

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Account Type: \_\_\_ Visa \_\_\_ Mastercard \_\_\_ Discover \_\_\_ AmEx

Credit Card Number: \_\_\_\_\_

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

Card Identification Number (3 digit number on back of Visa/MC, 4 digits on front of AMEX): \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ (USD)

I authorize **Northern California Fire Mechanics Association** to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Print Name, Sign and Date Below:

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

Name: \_\_\_\_\_

**Signed and return this form with Application Form**