

Credit Card Authorization Form – Fiscal Year 2011/12

- Please complete this form if you wish Kol Shofar to use your credit card for payments as listed below.
- Please complete the entire form. Incomplete forms cannot be processed.

Name _____
PLEASE PRINT

Billing Address _____ ZIP _____

Kol Shofar is authorized to charge my: VISA MC AMEX

Credit card number: _____

Expiration date: _____

3 Digit Security Code on back of card: _____

ANNUAL MEMBERSHIP COMMITMENT

PLEASE NOTE: Your credit card will be used to pay your membership as follows

- Monthly (Equal charges ending in June, 2012)
- Semi Annually (2 Charges: 75% upon receipt of this form and 25% in December, 2011)
- One time charge on July 1, 2011 (or upon receipt of this form if received after July 1)

OTHER ANNUAL DONATIONS

Your credit card will be used by our accounting office to pay all of the following as a one time charge, UNLESS YOU OPT OUT OF A PARTICULAR ITEM

- Memorial Plaques, if ordered (one time charge) I opt out
- High Holy Day Campaign Pledge I opt out
(to be charged upon receipt of your pledge card)
- High Holy Day Guest Ticket(s) (one time charge) I opt out
- Book of Life (one time charge) I opt out
- High Holy Day Children's Program (one time charge) I opt out

SIGNATURE: _____

DATE: _____