

**CONTINUING
EDUCATION
PROGRAMS
atHUNTER**

**CREDIT/DEBIT CARD AUTHORIZATION
(MUST HAVE COPY OF ID AND CARD ATTACHED)**

| CREDIT/DEBIT CARDHOLDER INFORMATION | |
|-------------------------------------|---|
| NAME ON CARD | |
| TYPE OF CREDIT CARD | <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover |
| LAST FOUR DIGITS OF CREDIT CARD | |
| CREDIT CARD SECURITY CODE | |
| EXPIRATION DATE | |
| BILLING ADDRESS | |

| AUTHORIZED USER OF CREDIT/DEBIT CARD (STUDENT INFORMATION) | |
|--|--|
| NAME | |
| PHONE NUMBER | |
| RELATION TO OWNER | |
| TOTAL AMOUNT CHARGED | |
| DATE | |

| AUTHORIZATION OF CARD USE | |
|---|------|
| <p>I certify that I am the authorized holder and signer of the credit card referenced above. I certify that all information above is complete and accurate.</p> <p>I hereby authorize collection of payment for all charges as indicated above. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. If additional charges are going to be authorized a new form will have to be completed.</p> | |
| CARDHOLDER NAME | |
| SIGNATURE | DATE |