



**CREDIT CARD AUTHORIZATION FORM**

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

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Authorization Type:**

- Volunteer Bond \$100
- Equipment Deposit \$400

**Card Type:**

- Master Card
- Visa
- American Express

**Card Number:** \_\_\_\_\_

**Expiry Date:** \_\_\_\_\_ **CVV #** \_\_\_\_\_

I authorize the Niagara Spears to process my credit card for the above amount indicated above by September 1<sup>st</sup> if volunteer hours are not completed and/or equipment is not returned at the end of the season. I authorize the Niagara Spears to store my information at the Club House for the 2019 Season, at that point I will indicate if my information is returned to me or destroyed.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_