

## Credit Card Authorization

I (we) hereby authorize Andrews University Summer Camp / The Crayon Box Children's Learning Center to initiate recurring credit card charges to the below referenced credit card account(s).

- Visa
- Mastercard
- Discover Card
- American Express

Cardholder Name \_\_\_\_\_ Phone \_\_\_\_\_

Cardholder Address \_\_\_\_\_

**Primary Card Number** \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_

Security Code \_\_\_\_\_

**Secondary Card Number** \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_

Security Code \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_