



## CREDIT CARD AUTHORIZATION FORM

**2019 Figure World Qualifier Payment:**

Date of Request: \_\_\_\_\_

Club ID \_\_\_\_\_

Club Contact \_\_\_\_\_

Total Amount to Charge: \_\_\_\_\_

CC#: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security code: \_\_\_\_\_

Name on card: \_\_\_\_\_

Phone number of card holder: \_\_\_\_\_

Zip code of billing address: \_\_\_\_\_

**Fax to 402-483-1465, or scan and send to  
mschuller@usarollersports.org**