



## HBDSB Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us.  
This authorization will remain in effect until cancelled.

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____ CVV: _____
Cardholder ZIP Code (from credit card billing address): _____

*\*\* ALL credit cards will be charged a 4% service fee\*\**

I, \_\_\_\_\_, authorize Dance It Up 501(C)(3) non-profit, to charge my credit card \$\_\_\_\_\_.00 for agreed upon purchases. I understand that my information will be stored for proof of 2019 tax contribution towards non-profit organization.

\_\_\_\_\_   
Customer Signature

\_\_\_\_\_   
Date

Dance It Up, 501 (c)(3) Non Profit  
1091 Aviation Blvd.  
Hermosa Beach, CA 90254  
310-989-8157  
TAX ID: 81-1021431