

CREDIT CARD CHARGE FORM

EVENT: **RI District 6200 P.E.T.S.**

DATE: **February 24-25, 2012**

NAME ON CARD: _____

ADDRESS: _____

PHONE NUMBER: _____

I am a member of the RC of: _____

CREDIT CARD #: _____

CREDIT CARD TYPE: _____

(Visa, Master Card or Discover)

EXPIRATION DATE: _____

CODE ON BACK OF CARD: _____

AMOUNT CHARGED: _____

SIGNATURE OF CARD HOLDER: _____