

Elite Heat All Stars  
7330 Townline Road  
North Tonawanda, NY 14120  
Phone: (716) 389-0731  
EliteHeatCheer@gmail.com

### Credit Card Authorization Form

By signing this form you give Elite Heat All Stars permission to debit your account for any amount owed for more than 21 days.

**Please complete the information below:**

I \_\_\_\_\_ authorize Elite Heat All Stars to charge my credit card for any fees owed for more than 21 days.

Billing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

**Credit Card Information: Is card indicated below a debit card attached to a checking account? Yes                      No**

Account Type:     Visa             MasterCard

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

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CCV \_\_\_\_\_

3 digit number on back of Visa/MC

By checking box, I authorize card to be used to pay for private lessons, if needed

\_\_\_\_\_  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I authorize Elite Heat All Stars to charge the credit card indicated in this authorization form according to the terms outlined above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.