



ATC FAMILY CREDIT CARD FORM

PAYMENT

Type or print legibly in ink

VISA

MasterCard

Amex

Discover

Amount \$ _____

Credit Card Number

Expire Date

Security Code

Name on Card

Billing Address

City

State

Zip

Organization

Phone #

Email

I, _____
Credit Card Holder's Name

authorize All Things Cheer Family of companies to charge my credit card the amount listed above plus a 3% transaction fee.

Signature Required

Date

Internal Use

