



### **Credit Card Charge Authorization**

I authorize the School of Arts & Culture at MHP to charge my credit card for services provided by or the rental use of the School.

Name of Service or Event:

Date of Service or Event:

Client:

Address:

Amount:

Name on Credit Card:

Credit Card Type (check one): Mastercard  Visa  Discover

Credit Card Number:

Expiration Date:

3 digit security code from back of card:  
(this number is located on the back of your card on the right)

Billing address Zip Code:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Please fax back to: 408.272.9920  
Or email to [nelly@schoolofartsandculture.org](mailto:nelly@schoolofartsandculture.org)