



COLORADO

BASKETBALL CLUB

Credit Card Authorization Form

Player Name: _____

Sign and complete this form to authorize Colorado Basketball Club to make a debit to your credit card listed below. By signing this form you give us permission to debit your account for the amount indicated on or after the listed date.

CARDHOLDER INFORMATION

Name: _____

Billing Street Address: _____

Street Address (cont.): _____

City: _____ State: _____ Postal Code: _____

Country: _____ Email _____

Direct Telephone: (____)____-_____

BILLING INFORMATION

I authorized Colorado Basketball Club to charge my credit card for the goods and services provided.

- I authorize a one-time charge against my credit card for the following amount \$_____.
- I authorize 2 times per season a recurring charge against my credit card for the following amount \$_____
- Monthly payment of \$_____.** Season total will be divided by number of months and due 1st of each month

If a check or PayPal payment is not received by the 5th of each month, I authorize my credit card to be charged for the monthly balance due plus a \$30.00 administrative fee. PayPal payments should be sent to info@coloradobasketballclub.com and checks mailed to CBC PO Box 632103, Littleton, CO 80163

CREDIT CARD INFORMATION

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____ Zip Code _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

Cardholder Signature _____ Date ___/___/___

I authorize Colorado Basketball Club to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services of basketball fees, for the amount indicated above only, and is valid for one time use and/or reoccurring use until balance is paid in full. 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.

Payments are due on the first of each month and my card will be charged accordingly. I am paying for a roster spot and am responsible for the entire season fee.