



# Victory Outreach International

PO BOX 3760, SAN DIMAS, CA 91773

WWW.VICTORYOUTREACH.ORG

PHONE: (909) 599-4437 FAX: (909) 599-6244

## CREDIT CARD AUTHORIZATION

**EVENT NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### CARD HOLDER'S INFORMATION:

CHURCH / CITY NAME: \_\_\_\_\_

CARD HOLDER / CONTACT NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

\*DAYTIME/CELL PHONE: ( ) \_\_\_\_\_ EVENING PHONE: ( ) \_\_\_\_\_

\* EMAIL ADDRESS: \_\_\_\_\_

### CREDIT CARD INFORMATION

#### TYPE OF CARD:

\_\_\_ MASTERCARD \_\_\_ VISA \_\_\_ DISCOVER  
\_\_\_ AMERICAN EXPRESS

CREDIT CARD NO.

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

NAME AS IT APPEARS ON THE CARD:

\_\_\_\_\_

EXPIRATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*LAST 3 #'S ON BACK OF CARD \_\_\_\_\_

TOTAL AMOUNT \$ \_\_\_\_\_ U.S.D.

#### \*REQUIRED INFORMATION

#### EVENT NAME & DATES:

\_\_\_\_\_  
\_\_\_\_\_

#### REGISTRANT'S FULL NAME:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

*I hereby authorize VICTORY OUTREACH INTERNATIONAL® to charge my credit card for the amount indicated above based on predetermined registration cost. I understand that late fees may apply if registration is not received by predetermined deadline dates and times or registration forms are not attached. If any portion of this form is incomplete, my order/registration will not be fulfilled.*

X \_\_\_\_\_  
Authorized Signature - as on the card

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Print Name - as printed on the card

**\*\*\*FAX THIS COMPLETED SIGNED FORM & REGISTRATION FORMS TO  
(909) 599-6244**