

CREDIT CARD AUTHORIZATION FORM

(Please print legibly to ensure timely processing. Required field with **)

**Cardholder's Name:			
☐ Master Card ☐ VISA ☐ A	merican Express	☐ Bank Debit Card	
**Card Number:	**	Expiration Date:/	-
**Security Code:			
(VISA & MC: last three digits print	ed on the signature	panel)	
(AMEX: printed above the card #)			
**Card Issuing Bank Phone No:	()		
(Telephone Number Is Printed On	the Back of Card)		
Billing Address (Where you receins **Street:	Š		
City: St	ate: **Zi	p Code:	
Authorization: I authorize Divete	ch, Inc. to charge m	y card for class	
registration(s)/order(s)/invoice(s).	I agree to pay the c	redit card charge(s) in accord	dance with
the Card Issuer Agreement. I unde	erstand that there w	ould be a delay in class rese	rvation or of
shipment of goods if the card is d	eclined or otherwise	incurred difficulty during p	rocessing.
Note: The signer of this statemen	t MUST be the name	ed cardholder.	
**Signature:		/	/
To complete the processing of you	r class registration/o	rder, send this form along wi	th your class

5325 Cornish • Houston, Texas • 77007

registration form/order to the address listed below OR email to theshop@divetechhouston.com.