



SAN DIEGO'S
COMMUNITY MUSIC CENTER
www.villamusic.org

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us.
This authorization will remain in effect until cancelled.

You authorize regularly scheduled charges to your credit card. You will be charged as per your monthly invoice each billing period. The charge will appear on your credit card statement as Villa Musica. You understand that your information will be saved to Villa Musica's secure Quickbooks file for future monthly tuition invoices on your account and any additional classes, ensembles, camps and supplies will also be charged at your request.

I _____ authorize Villa Musica to charge my Credit Card indicated
(Cardholder's Name)

below for Monthly Tuition on the _____ of each month.
(day 1-10)

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA
Cardholder Name (as shown on card) _____
Card Number: _____ - _____ - _____ - _____
Expiration Date (mm/yy): _____
CCV (3 digits) _____
Cardholder ZIP Code (from credit card billing address): _____

Customer Signature

Date