

# 2024 Joint Service ATC Symposium

## May 13 - 16, 2024

### Myrtle Beach, SC

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## Credit Card Authorization Form

**Upon ATCA's receipt of this Credit Card Authorization Form, your card will be charged the specified amount.**

Payment Options:     AMEX     MASTERCARD     VISA

Name of Organization: \_\_\_\_\_

PRINT Name as it appears on card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date:    Month: \_\_\_\_\_ Year: \_\_\_\_\_

CVV Security Code: \_\_\_\_\_

Billing Address of card: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email address (payment receipt will be sent to this address):  
\_\_\_\_\_

Subtotal: \$ \_\_\_\_\_ 2.9% Credit Card Processing Fee: \$ \_\_\_\_\_

TOTAL Amount to be charged: \$ \_\_\_\_\_

Purpose of charge: \_\_\_\_\_  
\_\_\_\_\_

Authorized Signature: \_\_\_\_\_