

14255 Peyton Drive, Chino Hills, California 91709 (909) 627-3584

To be used in conjunction with Ayala High School Student Store for the following purchase

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.

| Credit Card Information | | | | |
|---|-------------------------|--------|------------|--------|
| Card Type: | □ MasterCard □ Other | □ VISA | □ Discover | □ AMEX |
| Cardholder Name (as shown on card): | | | | |
| Card Number: | | | CSV Number | |
| Expiration Date (mm/yy): | | | | |
| Cardholder ZIP Code (from credit card billing address): | | | | |

I, ______, authorize _______ to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.