



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

# Credit Card Authorization Form

Please complete this form if purchasing items in the student store with a credit card. This form is not needed if purchasing from the webstore.

Date \_\_\_\_\_

Student Name \_\_\_\_\_

Student ID# \_\_\_\_\_

Contact Phone # \_\_\_\_\_

Please complete all fields

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

I \_\_\_\_\_, authorize Ruben S. Ayala High School to charge my credit card above for agreed upon purchases.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date