



## Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US  
All information will remain confidential

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover \_\_\_\_\_ AmEx

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card Identification Number: \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ Please indicate: One-time \_\_\_\_\_ Monthly \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ Please indicate: One-time \_\_\_\_\_ Monthly \_\_\_\_\_

I authorize Athena Gun Club to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Print Name, Sign and Date Below:

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

Name: \_\_\_\_\_

**Once signed return the completed form to:**

**Tracy Hale, Controller  
Athena Gun Club  
10814 Katy Fwy, Houston, TX 77043  
email: [tracy.hale@athenagunclub.com](mailto:tracy.hale@athenagunclub.com)  
fax: (832) 550-2346**